COMPUTER REPAIR INVOICE

REPAIR SHOP

Business name _____

Address _____

Phone / email _____

INVOICE DETAILS

Invoice no. _____

Invoice date _____

Payment terms _____

Due date _____

Ticket no. _____

BILL TO (CUSTOMER)

Customer name _____

Phone / email _____

DEVICE

Device _____

Make / model _____

Serial no. _____

Data to keep _____

Operating system _____

Reported problem _____

Drop-off / pickup _____

DIAGNOSTIC

Item	Details	Qty	Unit	Rate	Amount

Diagnostic subtotal _____

DATA BACKUP AND RECOVERY

Item	Details	Qty	Unit	Rate	Amount

Data services subtotal _____

PARTS

Item	Details	Qty	Unit	Rate	Amount

Parts subtotal _____

LABOR

Item	Details	Qty	Unit	Rate	Amount

Labor subtotal _____

HOW TO PAY

Accepted methods _____

Account name _____

Bank details _____

Payment reference _____

Subtotal _____

Sales tax, if applicable (_____%) _____

Amount due _____

REPAIR NOTES

Thank you. Keep this invoice with your device records.