SERVICE RECEIPT

PAID

SERVICE BUSINESS

Business name _____

Address _____

Phone / email _____

RECEIPT DETAILS

Receipt no. _____

Receipt date _____

CUSTOMER

Customer name _____

Address _____

SERVICE VISIT

Service date _____ Equipment _____

Technician _____

Description	Service or part	Qty	Rate	Amount

PAYMENT

Payment method _____

Payment reference _____

Date paid _____

Subtotal	
Sales tax, if applicable	
Total	
Amount paid	

Thank you. Keep this receipt with your appliance records.