INVOICE

Invoice no. _____
Invoice date _____
Due date _____
Job / order no. _____

Your garage name

Address _____
Phone / email _____
VAT no. _____

BILL TO

Name _____
Address _____
_____
Phone / email _____

VEHICLE

Registration _____
Make / model _____
Mileage _____
VIN _____

Parts

Part no.	Description	Qty	Unit price	VAT %	Net

Labour

Technician	Work carried out	Hours	Rate	VAT %	Net

PAYMENT DETAILS

Bank _____
Account name _____
Sort code _____
Account no. _____
Reference _____

Parts (net)	
Labour (net)	
VAT	
MOT (no VAT)	
TOTAL	
Paid	
BALANCE DUE	

NOTES / WARRANTY