

GENERAL REPAIR ORDER



YOUR COMPANY NAME

Address
 City State Zip
 Phone And Fax
 Advertising Line

REPAIR ORDER

123456

NAME		DATE RECEIVED		<input type="checkbox"/> A.M.
				<input type="checkbox"/> P.M.
ADDRESS		MAIL		DATE PROMISED
				<input type="checkbox"/> A.M.
				<input type="checkbox"/> P.M.
CITY		PHONE		MODEL NO.
APPLIANCE		<input type="checkbox"/> PICK UP	<input type="checkbox"/> SERVICE	<input type="checkbox"/> WARRANTY
		<input type="checkbox"/> DELIVER	<input type="checkbox"/> INSTALL	<input type="checkbox"/> ESTIMATE
				SERIAL NO.
REPAIRED IN		ESTIMATE		DELIVERY
<input type="checkbox"/> HOME	<input type="checkbox"/> SHOP			<input type="checkbox"/> OURS
				<input type="checkbox"/> PICK UP
				<input type="checkbox"/> C.O.D.
				<input type="checkbox"/> CHG.

CUSTOMER'S COMPLAINT

QTY.	PART NO.	DESCRIPTION	AMOUNT

MAJOR LABOR PERFORMED	TOTAL	PARTS, MATERIAL	
		TAX	
	LABOR		
	PICK UP, DELIVERY OR SERVICE CALL		
		TAX	
TOTAL (C.O.D.)			

OWNERS SIGNATURE INDICATES SATISFACTORY PERFORMANCE OF SET AT TIME OF DELIVERY OR COMPLETION OF REPAIRS IN HOME. SIGNATURE

GUARANTEE: ALL WORK PERFORMED BY QUALIFIED TECHNICIANS. ALL MATERIALS USED IN REPAIR OF THIS UNIT ARE OF FIRST QUALITY AND GUARANTEED FOR A PERIOD OF NINETY DAYS AFTER DATE OF REPAIR.