

ORDER FOR NECESSARY PARTS

ALL PARTS INSTALLED ARE NEW UNLESS OTHERWISE SPECIFIED

Table with 5 columns: COST, QTY., PART NUMBER, DESCRIPTION, PRICE. Multiple empty rows for part entry.

COMPANY NAME

Address
City State Zip
Phone • Fax
Advertising Line

NAME
ADDRESS
CITY STATE ZIP
RES. PHONE BUS. PHONE

DATE RECEIVED DATE PROMISED
APPROVED BY
DATE COMPLETED
PHONE WHEN READY ORDER TAKEN BY
TERMS
CASH CHARGE INTERNAL
NUMBER 000000

MAKE SERIAL NO. STATE ISSUED LICENSE NO. YEAR L W SIZE

REPAIR ORDER INSTRUCTIONS - CHARGE CUSTOMER WARRANTY

Write Separate Ticket Each Warranty Item: RANGE REFRIGERATOR FURNACE WATER HEATER AIR CONDITIONER

Table with columns: Work Code No., Time, Mech. No., Make & Model, S/N, LABOR CHARGE. Multiple empty rows.

PROPRIETARY FORM
REPRODUCTION PROHIBITED

TIRE SERIAL # # # #

REPAIRMAN'S TRIPS TO AND FROM LOCATION. Hours Mileage

(MAY BE CONTINUED ON OTHER SIDE) TOTAL PARTS \$

ALL WORK CASH ON DELIVERY

I am authorized to order the above listed work, including the labor, parts and materials for the Manufactured Home or Recreational Vehicle described above. I agree to pay regular retail prices in cash or acceptable terms to you, upon the completion of the work ordered.

THE RIGHT IS RESERVED TO SUBSTITUTE PARTS FOR THOSE CURRENTLY UNAVAILABLE. STORAGE CHARGES OF \$ PER DAY, WILL BE ADDED ON ALL ITEMS NOT PICKED UP WITHIN WORKING DAYS AFTER NOTIFICATION OF COMPLETION OF SERVICE.

AUTHORIZED BY X

CUSTOMER'S CLEAR RECEIPT
The above described property has been received, and after having examined the work done, the material furnished, both the work and material has been found to be satisfactory.

ALL PARTS WILL BE DISCARDED UNLESS OTHER WISE INSTRUCTED. SAVE DISCARD

By X
FORM 450.4 JENKINS BUSINESS FORMS • 800-851-4424 Rev 03/01

INTERNAL SUMMARY table with columns: ACCT., CHARGE, COST. Rows for TOTAL LABOR, TOTAL PARTS, TOTAL L/P, TAX, TOTAL INVOICE, FREIGHT, PAY THIS AMOUNT.

Reorder From: Jenkins Business Forms (800) 851-4424



CUSTOMER'S NAME

REPAIR ORDER NO.

ADDITIONAL MATERIAL USED				ADDITIONAL LABOR AUTHORIZED				LABOR RECORD							
COST	QUAN.	PART NO.	DESCRIPTION	SALES		DESCRIPTION		SALES		NAME	EMPL. NO.	OPER. NO.	COST	TIME ELAP.	TIME CLOCK
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
															OFF
															ON
					</										