|  |  |  |
| --- | --- | --- |
| [ADD LOGO/IMAGE] |  | **CELL PHONE REPAIR WORK ORDER** |
| **CONTRACTOR** |  | **CLIENT** |
| [COMPANY NAME] |  | [COMPANY NAME] |
| [ATTN] |  | [ATTN] |
| [STREET ADDRESS] |  | [STREET ADDRESS] |
| [CITY, STATE, ZIP CODE] |  | [CITY, STATE, ZIP CODE] |
| [PHONE] |  | [PHONE] |
| [E-MAIL] |  | [E-MAIL] |
|  |  |  |
| **PAYMENT** |  | **SCHEDULE** |
| Down Payment: [$] |  | Date: February 2, 2020 |
| Payment is Due: [ENTER TERMS] |  | Work Order No.: [#] |
| Total Amount: [$] |  | Start Time (if any): \_\_\_\_:\_\_\_\_ ☐ AM ☐ PM |
| Payment is Due: [ENTER TERMS] |  | End Time (if any): \_\_\_\_:\_\_\_\_ ☐ AM ☐ PM |

|  |  |  |  |
| --- | --- | --- | --- |
| **SERVICE** | **HOURS** | **RATE ($/HR)** | **AMOUNT ($)** |
|  |  |  |  |
|  |  | **TOTAL** |  |
|  |  |  |  |
| **PRODUCTS / MATERIALS** | **QUANTITY** | **UNIT PRICE** | **AMOUNT ($)** |
|  |  |  |  |
| IN WITNESS WHEREOF, the Client agrees to pay the total amount when payment is due for the services requested and products / materials used. The Contractor agrees to provide the services in exchange for the total amount.**CLIENT’S SIGNATURE** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **TOTAL** |  |
|  |  |
| **SUBTOTAL** |  |
| **DISCOUNT** |  |
| **TAX / VAT** |  |
| **TOTAL** |  |
| **CONTRACTOR’S SIGNATURE** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |