

WORK ORDER

Company Logo

W.O. # : [123456]

W.O. Date : 12/22/10

[Company Address]

[City, ZIP]

Phone: [000-000 0000]

Fax: [00-000 0000]

[Web Address]

Requested By : [Customer Name]

Customer ID : [abc1]

Department :

JOB	BILL TO	SHIP TO (if different)
[Enter description of work]	[Name]	[Name]
	[Company Name]	[Company Name]
	[Stress Address]	[Stress Address]
	[City, ZIP]	[City, ZIP]
	[Phone]	[Phone]

QTY	DESCRIPTION	TAXED	UNIT PRICE	LINE TOTAL
15	Part XYZ	x	150.00	2,250.00
5	Hourly Labor for ABC (5 hours)		50.00	250.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00

SUBTOTAL	\$2,500.00
TAXABLE	2,250.00
TAX RATE	6.875%
TAX	\$154.69
S & H	\$0.00
OTHER	\$0.00
TOTAL	\$2,654.69

Other Comments or Special Instructions

- Total payment due 30 days after completion of work
- Please refer to the W.O. # in all your correspondence
- Please send correspondence regarding this work order to:
[Name, Phone #, Email]

Make checks payable to
[Enter Company Name]

I agree that all work has been performed to my satisfaction.

Completed Date: _____

Signature: _____

Date: _____

Thank You For Your Business!

[Work Order Form](#)

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[Company Name / Logo]

WORK ORDER [HELP](#)

W.O. # : [123456]

Delete this column prior to printing.

W.O. Date : 12/22/10

[Company Address]

[City, ST ZIP]

Phone: [000-000-0000]

Fax: [000-000-0000]

[Web Address]

Requested By : [Customer Name]

← Use the Requested By section for both external and internal work orders

Customer ID : [abc1]

← May need to change, remove, or re-label this for internal work orders

Department :

JOB	BILL TO	SHIP TO (if different)
[Enter general description of work]	[Name]	[Name]
	[Company Name]	[Company Name]
	[Street Address]	[Street Address]
	[City, ST ZIP]	[City, ST ZIP]
	[Phone]	[Phone]

← Enter a Department name for internal work orders

← Enter a Building or Room number for internal work orders

Additional Details:

[Enter additional details to describe the work, as needed]

← Use this row to enter more specific work or service details

Authorized By: _____

Date: _____

← Use this line to get authorization prior to starting the work

SERVICE and LABOR	Hours	Rate (\$/hr)	Line Total
[Description of Task]	3	75.00	225.00
[Description of Task]	4	75.00	300.00
			0.00
			0.00
			0.00
			0.00

SUBTOTAL \$525.00

TAX RATE 0.000%

← If labor and service is subject to tax, enter the tax rate here

TAX A \$0.00

← Total tax for Labor and Service

PARTS and MATERIALS	Qty	Unit Price	Line Total
[Material Description]	4	12.42	49.68
[Part Description]	2	53.21	106.42
			0.00
			0.00
			0.00
			0.00

SUBTOTAL \$156.10

TAX RATE 0.000%

← Enter the tax rate for Parts and Materials

TAX B \$0.00

← Total tax for Parts and Materials

S&H \$0.00

← Enter Shipping and Handling charges here

OTHER \$0.00

← e.g. Change label to "Discount" and enter a negative number

TOTAL \$681.10

OTHER COMMENTS

- Total payment due 30 days after completion of work
- Refer to the W.O. # in all correspondence and in your payment
- Please send correspondence regarding this work order to:
[Name, Phone #, E-mail]

I agree that all work has been performed to my satisfaction.

Completed Date: _____

Signature: _____

Date: _____

← Use this line to show that the work was completed or delivered

Thank You For Your Business!

[Work Order Form Template](#)

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