

YOUR COMPANY NAME

Address
CITY, STATE, ZIP CODE
Phone Number

WORK ORDER INVOICE

NAME		DATE
ADDRESS		
		PHONE
LOCATION	TERMS	

MATERIAL	QTY.	DESCRIPTION	PRICE	AMOUNT
		DUPLICATE KEYS		
		ORIGINAL KEYS		
		DEADBOLT (TYPE)		
		KNOBSET (TYPE)		
		LOCKSET (TYPE)		
			TOTAL MATERIAL	

LABOR	DESCRIPTION	HRS/RATE	AMOUNT
	LABOR TO INSTALL ABOVE		
	CYLINDER COMBINATION CHANGE		
	SAFE COMBINATION CHANGE		
	EMERGENCY HOME/AUTO LOCKOUT SERVICE		
	SERVICE CALL		

CUSTOMER SIGNATURE: _____

<input type="checkbox"/> MAIN ENTRANCE	<input type="checkbox"/> REAR DOOR	<input type="checkbox"/> WINDOW	<input type="checkbox"/> SAFE
<input type="checkbox"/> FRONT DOOR	<input type="checkbox"/> HALL DOOR	<input type="checkbox"/> CLOSET	<input type="checkbox"/> PATIO DOOR
<input type="checkbox"/> SIDE DOOR	<input type="checkbox"/> INSIDE	<input type="checkbox"/> _____	

<input type="checkbox"/> OPEN LOCK(S)	<input type="checkbox"/> INSTALL	<input type="checkbox"/> REPIN	<input type="checkbox"/> CLEAN/LUBR.
<input type="checkbox"/> SECURE PREMISES	<input type="checkbox"/> REMOVE & REPLACE	<input type="checkbox"/> CHANGE COMB.	<input type="checkbox"/> ADJUST
<input type="checkbox"/> FIT KEYS	<input type="checkbox"/> MASTER KEY	<input type="checkbox"/> _____	

TOTAL LABOR	
SUB-TOTAL	
TAX	
TOTAL	

AUTHORIZATION FOR SECURITY / EMERGENCY SERVICES

I hereby certify that I have the authority to order the lock, key or security work designated above. Further, I agree to absolve the locksmith who bears this authorization from any and all claims arising from the performance of such work.

SIGNATURE: _____ DATE _____

IF AUTO	
YEAR	MAKE
MODEL	
LICENSE NO.	