

THIS DOCUMENT CONTAINS SECURITY FEATURES - SEE BACK FOR DETAILS

003634

Bank of America
N.A. 2000

DATE _____ AMOUNT _____

PAY TO THE ORDER OF _____

000000 600000000000000000000000*

REPAIR TAG N° 4321

CUSTOMER'S NAME _____

ADDRESS _____

PHONE _____ DATE RECEIVED _____

KEYS CLERK _____ DATE PROMISED _____

CODE _____



YOUR COMPANY NAME
P.O. Box
CITY, STATE, ZIP CODE
Phone Number
Advertising Line

NAME _____ DATE _____

ADDRESS _____

CITY _____

STATE _____ ZIP CODE _____

QUANTITY	DESCRIPTION	UNIT PRICE	PRICE	AMOUNT

CUSTOMER'S SIGNATURE _____

I hereby grant that I have the authority to order the sale, key or security work described above. Further, I agree to release the locksmith who does the work from any and all claims arising from the performance of such work.

DATE _____

0004115

WORK ORDER INVOICE

NO MERCHANDISE DELIVERED WITHOUT THIS CHECK,
NOT RESPONSIBLE FOR GOODS LEFT OVER 30 DAYS
NOR LOSS BY FIRE OR THEFT.

CLAIM CHECK

YOUR FIRM NAME HERE
123 Main Street
YOUR TOWN, STATE AND ZIP
Phone 123-4567 N° 4321



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