

COMPANY NAME

Address

Web/Email

Phone Number

WORKSHEET

REPORT

NO:

Customer Name:	
Address:	
	Works Order No
Contact Name:	Date:
Tel No:	Email:

TYPE OF WORKS

Fixed Price ☐ Additional ☐ Call-out Request ☐ Materials Purchase Only ☐

DESCRIPTION OF WORKS

EMPLOYEE SIGNATURE

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ADDITIONAL INFORMATION

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HOURS WORKED

Employee Name	Mon	Tues	Weds	Thurs	Fri	Sat	Sun

MATERIALS ORDERED/USED

Order No	Supplier	Description	No.	Cost Price

We/I am satisfied that the works carried out are to our satisfaction

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Signed CUSTOMER Representative

Print CUSTOMER Representative