



**SERVICE ORDER NO:**

CUSTOMER INFORMATION	SERVICE DESCRIPTION
CUSTOMER CONTACT INFORMATION	
<small>Name</small>	<small>Phone Number</small>
<small>E-Mail</small>	

DATE	NAME	TRAVEL TO HRS	START TIME	LUNCH HRS	STOP TIME	TRAVEL FROM HRS	TOTAL HRS
<b>- ADDITIONAL TIME OFF-SITE</b>							
<input type="checkbox"/> <b>FIXED PRICE ORDER NO TIME SHEET REQUIRED</b>							<b>TOTALS FOR TIME REPORT</b>

SERVICE REPORT

SIEMENS INDUSTRY INC. - LEAD REPRESENTATIVE	CUSTOMER REPRESENTATIVE
	<input type="checkbox"/> SERVICE COMPLETE <input type="checkbox"/> FORMAL REPORT IS REQUIRED (ADDITIONAL TIME REQUIRED) <input type="checkbox"/> NOT COMPLETE - ADDITIONAL SERVICES REQUIRED ON THIS ORDER <input type="checkbox"/> OTHER SERVICES REQUESTED – PLEASE CONTACT CUSTOMER <input type="checkbox"/> WERE YOU SATISFIED WITH OUR SERVICE?