

A&E Computers Service Center forms

Name: _____ **Company:** _____

Address: _____

Telephone: _____ **Fax:** _____

Service Schedule Date: _____

Service Work Needed: _____

Service Work Performed _____

Please note that a \$29/ hour minimum carry-in service rate, and/or \$60/hour on-site service rate will be applied to all equipment in repair. A& E Computers is not responsible for any or all information, data, or programs contained on all drives. Also, A&E Computers will not be held responsible for the termination of any warranty policy due to the servicing of a machine. Due to the nature of computer repair your computer may be kept a period of no longer than 1(one) week.

I have read and agree to the above:

Customer
Signature _____ **DATE** _____

Labor Charge: Hours _____ x \$29 or \$60/hr= _____
Parts: _____ **Price:** _____

Subtotal: _____

NYS Sales Tax x8.00%: _____

Total: _____

Return Address:
A&E Computer Solutions
1204 Willis Ave
Syracuse, NY 13204
Phone: 468-2665 Fax: 487-4168