INVOICE

[Company Name]
[License #]
[Phone Number]
[Email/Website]

Invoice #: ___________
Date: ___________
Due Date: ___________

CLIENT INFORMATION

Name: _______________________
Property Address:
____
____

PROJECT DETAILS

Project Name: ________________
Start Date: _________________
Completion Date: ____________

MATERIALS & SUPPLIES

Item Description	Quantity	Unit Cost	Total

LABOR & SERVICES

Service/Task Description	Hours/Rate	Price	Total

Material Subtotal: $_________
Labor Subtotal: $_________
Tax Rate (%): _________
Deposit Paid: ($________)
Balance Due: $_________

TERMS & NOTES

1. Please make all checks payable to: _________________________
2. Payment is due within _____ days of invoice date.
3. Warranty: [Number] year(s) on workmanship/labor.
4. All materials remain property of [Company Name] until final payment is received.