

# INVOICE

## Project Milestone

Invoice #: \_\_\_\_\_

Date: \_\_\_\_\_

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### FROM:

[Business Name / Electrician Name]

[License Number]

[Street Address]

[Phone / Email]

### BILL TO:

[Client Name]

[Project Address]

[Contact Information]

Project Description: \_\_\_\_\_

Milestone / Description	Status	Total Project %	Amount
[e.g., Rough-in / Inspection Stage]	Completed	____%	\$ _____
[e.g., Materials & Fixture Install]	Completed	____%	\$ _____
[Other Tasks/Permits]	-	-	\$ _____

Subtotal: \$ \_\_\_\_\_

Tax (\_\_\_\_%): \$ \_\_\_\_\_

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**Total Amount Due: \$ \_\_\_\_\_**

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**Payment Terms:** Due within \_\_\_\_ days. Please make checks payable to \_\_\_\_\_.

**Notes:** All work performed according to local electrical codes. Milestone sign-off required for next phase.