INVOICE

HVAC Contractor License: _____

Invoice #

_____

Date

_____

FROM (Subcontractor)

_____

_____

_____

Phone: _____

BILL TO (General Contractor/Client)

_____

_____

_____

Project Ref: _____

SERVICE LOCATION & DESCRIPTION

_____

Description of Materials / Labor	Qty / Hrs	Rate	Amount

Subtotal: $_____

Tax: $_____

Total Due: $_____

PAYMENT TERMS & NOTES

Payment due within _____ days. Please make checks payable to _____.

Work completed includes standard manufacturer warranties where applicable. Labor warranty expires on _____.