# CONSTRUCTION INVOICE

**Invoice #:** _____

**Date:** _____

**Project Name:** _____

**FROM (SUBCONTRACTOR)**

Name: _____

Address: _____

Phone: _____

Tax ID/SSN: _____

**TO (GENERAL CONTRACTOR/CLIENT)**

Company: _____

Contact: _____

Address: _____

Job Location: _____

| Description of Work / Materials | Quantity / Hours | Rate / Unit Price | Total |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

| Description of Work / Materials | Quantity / Hours | Rate / Unit Price | Total |
| --- | --- | --- | --- |
| | | | |

Subtotal: $ _____
Tax: $ _____
Total Amount Due: $ _____

**PAYMENT TERMS & INSTRUCTIONS**

Please make checks payable to: _____

Payment is due within _____ days of receipt of this invoice.

Signature: _____ Date: _____