

# INVOICE

[Company Name]  
[Address Line 1]  
[Phone Number]

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

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

---

## BILL TO:

[Customer Name]  
[Property Address]  
[City, State, Zip]

## PROJECT REF:

[e.g. Main Roof Replacement]

Material Description	Quantity	Unit Price	Total
Shingles (e.g. Asphalt Architectural)			
Underlayment (Rolls)			
Ice & Water Shield			
Drip Edge / Flashing			
Ridge Vents / Ventilation			
Roofing Nails / Fasteners			

Material Description	Quantity	Unit Price	Total
----------------------	----------	------------	-------

Sealant / Caulking

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

Sales Tax: \$ \_\_\_\_\_

Delivery Fee: \$ \_\_\_\_\_

---

**TOTAL DUE: \$ \_\_\_\_\_**

**Notes / Warranty Terms:**