

# DEPOSIT INVOICE

**Project:** Roofing Replacement/Repair

**Invoice #:** [0000]

**Date:** [Date]

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**Contractor:**

[Company Name]

[License Number]

[Phone Number]

[Email Address]

**Homeowner:**

[Client Name]

[Project Address]

[City, State, Zip]

Description of Work/Materials	Amount
Initial Deposit for Roofing Materials & Permitting	\$0.00
Mobilization & Labor Scheduling	\$0.00
<b>Total Contract: \$0.00</b>	

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**DEPOSIT DUE: \$0.00**

**Payment Instructions:**

Please make checks payable to [Company Name] or pay via [Payment Method].

Deposit is required prior to material delivery and commencement of work.

**Notes:**

[Insert warranty or cancellation terms here if applicable].