

[Company Name]

[Street Address]
[City, State, Zip]
[Phone Number]
[Email/Website]

DEPOSIT INVOICE

Invoice #: [00001]

Date: [MM/DD/YYYY]

Project Ref: [Project Address]

BILL TO

[Client Name]
[Billing Address]
[City, State, Zip]
[Phone]

PROJECT SCOPE

Roof Type: [Shingle/Metal/Tile]

Estimated Start: [Date]

Contract Total: \$[0.00]

Description	Percentage	Amount
Initial Deposit for Materials & Mobilization Required for material procurement and scheduling of labor.	[50]%	[\$0.00]

Subtotal: \$[0.00]

Tax: \$[0.00]

DEPOSIT DUE: \$[0.00]

Payment Terms: Deposit is due upon receipt to secure project dates and order materials. Final balance due upon completion of work.

Note: Work will be scheduled once the deposit is cleared.