

ADVANCE PAYMENT INVOICE

Business Name: [Company Name]
Phone: [Phone Number]
Email: [Email Address]

Invoice #: [0000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

Client:

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

Installation Site:

[Street Address]
[City, State, Zip]

Description of Materials/Services	Quantity	Unit Price	Total
Hardwood Species/Product: [Type/Grade]	[Sq Ft]	\$0.00	\$0.00
Underlayment & Installation Supplies	1	\$0.00	\$0.00
Labor: Sanding, Staining, or Finishing	[Sq Ft]	\$0.00	\$0.00

Project Total: \$0.00
Tax: \$0.00
Advance Payment (___ %): \$0.00

Balance Remaining: \$0.00

Terms & Conditions:

1. Advance payment is required to secure materials and scheduling.
2. Materials remain the property of [Company Name] until final payment is received.
3. Please allow [Number] days for wood acclimatization prior to installation.