

INSTALLATION INVOICE

[Company Name]

[Address / Contact]

INVOICE #
DATE

BILL TO:
PROJECT LOCATION:

Description of Services/Materials	Qty/Hrs	Rate	Amount
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Ventilation Unit Model:

Labor & Ductwork Installation

Parts/Fittings/Consumables

Permits & Inspections

Subtotal
Tax
TOTAL

TERMS & NOTES:

System testing completed and balanced to specifications.