

TAX INVOICE

[Contractor Company Name]

[License Number]

[Address Line 1]

[City, State, Zip]

Invoice #: [00000]

Date: [Date]

Project ID: [Project #]

PO #: [PO Number]

BILL TO

[Client Name]

[Client Company]

[Client Address]

[Tax ID / ABN]

PROJECT SITE

[Project Name]

[Site Address]

[City, State, Zip]

Description of Works / Materials	Quantity	Rate	Amount
[Service or Material Description]	[0.00]	[\$[0.00]]	[\$[0.00]]
[Service or Material Description]	[0.00]	[\$[0.00]]	[\$[0.00]]
[Service or Material Description]	[0.00]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]

Tax ([0%]): \$[0.00]

Retention ([0%]): (\$[0.00])

Total Amount Due: \$[0.00]

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account Name: [Name] | BSB/Routing: [000-000] | Account: [00000000]

Terms: Net [30] Days. All materials remain property of [Contractor Name] until paid in full.