

INVOICE

[Firm Name]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

Invoice #: _____
Date: _____
Due Date: _____

Bill To:

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

Tax Year:

20____

Service Description	Qty/Hours	Rate	Amount
Individual Income Tax Return (Form 1040)			
State Tax Return Preparation			
Schedule C / Business Expenses			
Electronic Filing Fees			

Subtotal: \$ _____

Discount: \$ _____

Total Balance Due: \$ _____

Notes: Payment is due upon receipt. Please make checks payable to "[Firm Name]". Thank you for your business.