

PLUMBING SERVICES

123 Pipe Lane, Water City, ST 12345
Phone: (555) 000-0000 | Email: service@plumbing.com

QUOTE / INVOICE

Number: # _____

Date: ___/___/20___

Due Date: ___/___/20___

BILL TO:

Phone: _____

SERVICE LOCATION:

Description of Work / Materials	Qty/Hrs	Rate	Total

Description of Work / Materials	Qty/Hrs	Rate	Total

Subtotal: \$ _____

Tax: \$ _____

Total Amount: \$ _____

NOTES & TERMS:

1. All work guaranteed for ___ days.
2. Payment is due upon completion unless otherwise agreed.
3. Please make checks payable to: **Plumbing Services**

Customer Signature: _____ Date: ___ / ___ / ___