PAINTING INVOICE

Company Name
Address Line 1
Phone / Email

Invoice #: _____
Date: _____

Client Information:

Name: _____
Address: _____
Phone: _____

Project Site:

Location: _____
Description: _____

Labor Costs

Description of Work	Hours	Rate	Total

Materials & Supplies

Item Description (Paint, Primer, etc.)	Qty	Unit Price	Total

Item Description (Paint, Primer, etc.)	Qty	Unit Price	Total

Labor Subtotal:$_____
Material Subtotal:$_____
Tax:$_____

Total Due:$_____

Notes / Terms: Payment is due within ___ days. Thank you for your business.