

INVOICE

Company Name
123 Construction Way
City, State, Zip
Phone: (555) 000-0000

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

Name: _____
Address: _____
City/State: _____

JOB SITE / PROJECT

Location: _____
Project Manager: _____

Description (Boarding, Taping, Skimming)	Quantity / Sq Ft	Rate	Amount

Subtotal: \$ _____
Tax: \$ _____

Total Due: \$ _____

NOTES / PAYMENT INSTRUCTIONS

Please make checks payable to: **Company Name**

Terms: Net 30. Thank you for your business!