INVOICE

[Contractor/Company Name]
[Address Line 1]
[City, State, Zip]
[Phone] | [Email]

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

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

PROJECT DETAILS:

Siding Type: _____
Square Footage: _____
Permit #: _____

Description of Materials / Labor	Quantity	Unit Price	Total
Main Siding Panels (Vinyl/Fiber Cement/Wood)			
Underlayment / House Wrap / Flashings			
Trim, Soffit, and Fascia Components			
Installation Labor (Tear-off & Disposal)			
Installation Labor (New Siding Application)			

Subtotal: $_____
Tax: $_____

Total Amount: $_____
Amount Paid: $_____
Balance Due: $_____

Notes / Terms:

1. Warranty covers labor for [X] years from completion date.
2. Please make checks payable to: _____
3. Payment is due within [X] days of invoice date.