INVOICE

[Company Name]
[Address Line 1]
[Phone Number]

Invoice #: _____

Date: _____

Client Information:

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

Payment Terms:

Due on Completion

Appliance / Service Description	Qty	Unit Price	Total
[e.g., Refrigerator Installation & Leveling]			
[e.g., Dishwasher Plumbing Hookup]			
[e.g., Gas Range Connection & Leak Test]			

Appliance / Service Description	Qty	Unit Price	Total
[e.g., Parts: Braided Hoses / Gas Line Kit]			
[e.g., Old Appliance Haul-away Fee]			

Subtotal: $_____

Tax: $_____

Grand Total: $_____

Notes:

All installations are performed according to local building codes. Manufacturer warranty applies to appliances only. Workmanship guaranteed for [30/60/90] days.

Customer Signature: _____ Date: _____