KITCHEN REMODELING CO.

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

INVOICE

INV-001
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Name]
[Client Address]
[Client Phone]

PROJECT LOCATION:

[Property Address]
Project Manager: [Name]

DESCRIPTION OF WORK / MATERIALS	QTY/HRS	UNIT PRICE	TOTAL
Demolition & Debris Removal	-	$0.00	$0.00
Cabinetry Installation (Custom/Semi-Custom)	-	$0.00	$0.00
Countertop Fabrication & Install (Quartz/Granite)	-	$0.00	$0.00
Electrical & Plumbing Rough-in/Trim	-	$0.00	$0.00
Backsplash Tile & Flooring Labor	-	$0.00	$0.00
Subtotal:	$0.00		
Tax (0%):	$0.00		

Total:	**$0.00**

Notes & Payment Instructions:

Please make all checks payable to Kitchen Remodeling Co. All work is guaranteed for [Number] year(s) from completion. Final payment is due within [Number] days of project sign-off.