

INVOICE

[Contractor Business Name]
[Street Address]
[City, State, Zip]

Invoice #: [0000]
Date: [MM/DD/YYYY]
Project: Bathroom Remodel

BILL TO:

[Client Name]
[Client Address]
[Phone/Email]

Task Description	Contract Amount	% Complete	Total Earned	Previous Billing	Amount Due
Demolition & Disposal	\$0.00	0%	\$0.00	\$0.00	\$0.00
Plumbing & Electrical Rough-in	\$0.00	0%	\$0.00	\$0.00	\$0.00
Wall Prep & Waterproofing	\$0.00	0%	\$0.00	\$0.00	\$0.00
Tiling & Grouting	\$0.00	0%	\$0.00	\$0.00	\$0.00
Fixtures & Finish Carpentry	\$0.00	0%	\$0.00	\$0.00	\$0.00
Subtotal: \$0.00					

Tax: \$0.00
Less Deposit: (\$0.00)
Current Total Due: \$0.00

Notes/Terms:

Please make checks payable to [Business Name]. Payment is due within [X] days of invoice date.