

INVOICE

[Business Name]
[Phone Number]
[Email Address]

Invoice #: _____
Date: _____

BILL TO:

JOB LOCATION:

LABOR DETAILS

Service Description	Hours	Rate	Total

MATERIALS & SUPPLIES

Item Description	Quantity	Unit Price	Total

Labor Subtotal: \$ _____
Materials Subtotal: \$ _____

Tax: \$ _____

TOTAL DUE: \$ _____

NOTES / TERMS

Payment is due within ____ days. Please make checks payable to _____.