INVOICE

[Your Company Name]
[Address]
[Phone/Email]

Invoice #: _____

Date: _____

Project: _____

Client / Property Owner:

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

Service Description (Labor & Installation)	Hours/Units	Rate	Total
Site Visit & Space Planning			
Furniture Loading & Transport Labor			
On-site Furniture Assembly & Placement			
Art Hanging & Accessory Styling			

Service Description (Labor & Installation)	Hours/Units	Rate	Total
De-staging & Removal Labor			

Labor Subtotal: $ _____
Equipment/Materials: $ _____

Total Amount Due: $ _____

Notes: Terms are Net [30]. Please make checks payable to [Company Name].

Thank you for your business.