

INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone] | [Email]
License #: [License Number]

Invoice #: _____
Date: _____
Project: _____

BILL TO:

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

SITE LOCATION:

[Job Site Address]
[Permit Number]

Work Description / Materials	Qty/Hrs	Rate	Amount
[Service/Labor Description]			\$
[Materials/Parts Detail]			\$
[Additional Line Item]			\$

Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

Payment Terms: Net [Number] Days. Please make checks payable to [Company Name].

All electrical work performed according to local building codes and NEC standards. All materials remain the property of [Company Name] until invoice is paid in full.