

GENERAL CONTRACTOR

123 Construction Way
City, State, Zip
Phone: (555) 000-0000
License: #00000000

INVOICE

Invoice #: _____
Date: _____
Project: _____

BILL TO

Client Name
Address Line 1
City, State, Zip
Email/Phone

JOB SITE

Site Address Line 1
City, State, Zip
Permit #: _____

Description of Work / Materials	Quantity	Unit Price	Amount

Subtotal: \$0.00
Tax: \$0.00
Total Due: \$0.00

NOTES & TERMS

Payment is due within ____ days. Please make checks payable to **[Company Name]**.

Thank you for your business!