LABOR INVOICE

Contractor:
License #:

Invoice #:

Date:

BILL TO:
PROJECT LOCATION:

Description of Labor/Service	Hours	Rate	Amount
			$
			$
			$
			$
			$

Labor Subtotal: $_____
Other/Misc: $_____
TOTAL: $_____

TERMS & NOTES:

Payment is due within days. Please make checks payable to the contractor name above.