INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: _____
Date: _____

BILL TO:

[Customer Name]
[Service Address]
[City, State, Zip]
[Phone/Email]

JOB DETAILS:

Technician: _____
Disposal Model: _____
Warranty: _____

Description	Qty/Hrs	Rate	Amount
Garbage Disposal Unit (Replacement)			
Installation Labor			
Plumbing Fittings / Connectors			
Disposal of Old Unit			

Subtotal: $_____
Tax: $_____

TOTAL: $_____

Notes: [Leak checks performed, power cord replaced/reused, sink flange sealed]

Payment is due within [XX] days. Thank you for your business!