INVOICE

Business Name: _____

License #: _____

Invoice #: _____

Date: _____

Client Information:

Name: _____

Address: _____

Phone: _____

Service Location:

Address: _____

City/Zip: _____

Description of Service / Materials	Qty/Hrs	Rate	Amount
Kitchen Sink Installation (Labor)	____	$____	$____
Plumbing Hookup (P-Trap, Drain Lines)	____	$____	$____
Faucet & Sprayer Installation	____	$____	$____
Garbage Disposal Integration	____	$____	$____

Description of Service / Materials	Qty/Hrs	Rate	Amount
Materials (Sealant, Connectors, Valves)	____	$____	$____
Miscellaneous: _____	____	$____	$____

Subtotal: $_____
Tax: $_____

Total: $_____

Terms & Notes:

Work completed as per agreement. Warranty on labor for _____ days. Payment due upon receipt.