[COMPANY NAME]

[Street Address]
[City, State, Zip]
[Phone Number]
[License #]

INVOICE

Invoice #: [0000]
Date: [Date]
Project ID: [Project #]

CLIENT / BILL TO

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

PROJECT SITE

[Project Name]
[Site Address]
[Suite/Unit #]
[City, State, Zip]

DESCRIPTION OF BUILDOUT SERVICES / MATERIALS	HOURS/QTY	RATE	AMOUNT
General Conditions (Permits, Insurance, Cleanup)			$0.00
Demolition & Site Preparation			$0.00

DESCRIPTION OF BUILDOUT SERVICES / MATERIALS	HOURS/QTY	RATE	AMOUNT
Framing, Drywall & Partitioning			$0.00
Mechanical, Electrical & Plumbing (MEP)			$0.00
Finishes (Flooring, Painting, Ceiling)			$0.00
Custom Millwork & Cabinetry			$0.00

Subtotal: $0.00
Tax: $0.00
Retainage (%): ($0.00)
TOTAL DUE: $0.00

TERMS & NOTES

Payment Terms: Net [30] Days. Please make checks payable to **[Company Name]**.

Thank you for your business.