INVOICE

[Invoice Number]
Date: [Date]

[Company Name]

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

BILL TO:

[Client Name]
[Client Address]
[Client Phone]

JOB SITE:

[Project Address]
Flooring Type: [Type]

Description of Work / Material	Qty / Sq. Ft	Unit Price	Total
Flooring Material Installation	0.00	$0.00	$0.00
Underlayment / Prep Work	0.00	$0.00	$0.00
Baseboard / Trim Labor	0.00	$0.00	$0.00
Old Floor Removal & Disposal	0.00	$0.00	$0.00

Subtotal: $0.00
Tax: $0.00

Total: $0.00

Notes / Terms:

Please make checks payable to [Company Name]. Payment is due within [Number] days. Thank you for your business!