|  |  |
| --- | --- |
| Logo placeholder | INVOICE |
| Company NameCompany Slogan | INVOICE # No.Date:  |
| Street Address, City, ST ZIP CodePhone Phone Fax FaxEmail | DUE DATE:  |

|  |  |  |
| --- | --- | --- |
| To | Client name Street AddressCity, ST ZIP CodePhone |  |

**REQUIRED MATERIALS**

|  |  |  |  |
| --- | --- | --- | --- |
| QUANTITY | DESCRIPTION | UNIT PRICE | AMOUNT |
|  |  |  |  |
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|  |  |  |  |
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|  |  |
| --- | --- |
| **TOTAL MATERIAL** | **$** |

**LABOR**

|  |  |  |  |
| --- | --- | --- | --- |
| hour | description | $ / hour | amount |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |
| --- | --- |
| **TOTAL LABOR** | **$** |
| **SUB TOTAL** | **$** |
| **SALES TAX** | **$** |
| **TOTAL** | **$**  |

|  |
| --- |
| **COMMENTS**  |
|  |

|  |
| --- |
| Thank you for your business! |