

Invoice

Date: _____

Due Date: _____

Invoice #: _____

Payment Terms: _____

From:

Bill To:

Material Description	Quantity	Cost Per Item	Total

Materials Tax Rate:

Materials Total:

Labor Description	Hours	Rate/Hour	Total

Labor Tax Rate:

Labor Total:

Notes:

Subtotal: _____

Shipping: _____

Total Tax: _____

Invoice Total: _____

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Thank you for your business!