Invoice

From:

Date: Invoice #:	
Totals Material: Labor: Invoice Tot	tal:

				Labor:	
Material Description	Quantity	Cost Per Item	Total	Notes	
				NOLES	

Bill To:

Material Description	Quantity	Cost Per item	TOLAI	NOLES	

Materials Total:

Labor Description	Hours	Rate/Hour	Total	Notes
Tax Rate:		Labor Total:		

Total Tax:

Subtotal:

Payment Terms:

Invoice Total:

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