

[Your Business Name]

[Street Address]

[City, State ZIP]

[Phone] · [Email]

[Website]

License #: [License Number]

INVOICE

Invoice # [0001]

Invoice date [MM/DD/YYYY]

Due date [MM/DD/YYYY]

Job / PO # [Job Number]

BILL TO

[Customer Name]

[Billing Address]

[City, State ZIP]

[Phone] · [Email]

JOB SITE

[Job Site Address]

[City, State ZIP]

Work completed: [MM/DD/YYYY]

Technician: [Name]

Description	Qty	Unit	Rate	Amount
Labor				
[Service performed, e.g. Replace 50-gal water heater]	[1]	[hr]	[\$0.00]	[\$0.00]

Materials and equipment				
[Part or material, brand and model]	[1]	[ea]	[\$0.00]	[\$0.00]

Other charges (permits, disposal, trip fee)				
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Subtotal	[\$0.00]
Discount	[-\$0.00]
Sales tax ([0.00]%)	[\$0.00]
Total	[\$0.00]
Payments received	[-\$0.00]
Balance due	[\$0.00]

PAYMENT TERMS

Payment due within [15] days of the invoice date.

Late payments: [your late fee policy, if any].

We accept: [card, ACH / bank transfer, check, cash].

Make checks payable to [Your Business Name].

NOTES AND WARRANTY

[Warranty on labor and parts, e.g. 1-year labor warranty].

[Manufacturer warranty details, if any].

[Any other notes for the customer].

Thank you for your business!

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