**INVOICE**

**[COMPANY NAME]**

|  |  |
| --- | --- |
| Invoice No: |  |
| Invoice Date: |  |
| Due Date: |  |
| PO No: |  |
| Terms: |
| Work Description: |
| Billing Period: |

[Address] [Phone Number] [Contact person] [Email]

BILL TO:

[Address] [Email]

[Phone Number]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item Description/Materials | Duration of Work | Hours | Hourly Fee | Amount |
| From | To |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Notes: | Subtotal |  |
| Discount |  |
| Tax total |  |
| Paid |  |
| Payment Method: | **Total Due** |  |

***Thank you!***