**INVOICE**

**[COMPANY NAME]**

|  |  |
| --- | --- |
| Invoice No: |  |
| Invoice Date: |  |
| Due Date: |  |
| PO No: |  |
| Terms: | |

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

**BILL TO:**

[Address] [Email]

[Job Description] [Job Address] [City, State Zip]

[Start Time/End Time]

[Phone Number]

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Day of Week | Date | Description | Duration | | Hours | Rate | Amount |
| From | to |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Notes/Comments: | | | Subtotal | | |  | |
| Discount | | |  | |
| Tax total | | |  | |
| Paid | | |  | |
| Payment Method: | | | **Total Due** | | |  | |

***Thank you!***