

Tattoo Invoice

Kao Ink Inc.

6230 Lanark Street
Vancouver BC
V5P 2Y8

Invoice#: _____

Customer Name: _____

Invoice Date: _____

Customer Email: _____

Customer Phone#: _____

| Description | Date | Rate | Amount |
|-------------|------|------|--------|
| | | | |

Due Date: _____

Subtotal: _____

Sales Tax: _____

Total : _____

Terms & Conditions:

Deposits may be forfeited for no-shows, rebookings or cancellations.

Payment Options:

Please send payments via E-transfer to: **lisakao.ink@gmail.com**

Cash or credit card payments are accepted in the store.