

[Company Name]

[Street Address]

[City, ST ZIP]

Phone: (000) 000 0000

# INVOICE

INVOICE #	DATE
[123 456]	5/1/2014

## BILL TO

[Name]

[Company Name]

[Street Address]

[City, ST ZIP]

[Phone]

[Email Address]

DESCRIPTION	AMOUNT
Service Fee	200.00
Labor: 5 hours at \$75/hr	375.00
New client discount	(50.00)
Tax (4.25% after discount)	26.56
Thank you for your business!	
<b>TOTAL</b>	<b>\$ 551.56</b>

If you have any questions about this invoice, please contact

[Name, Phone, email@address.com]