Company Name

INVOICE

Company	00000
Street Address	
City State Zin Code	

Phone: (123) 456-7890 Fax: (123) 456-7890

Website: www.myaccountingcourse.com

Amount

100.00

550.00

175.00

825.00

49.50

874.50

6%

Customer ID Due Date

Quantity

Subtotal

Tax Rate

Tax Due

TOTAL

\$

5

Date Invoice #

Bill To:

Parts

Street Address

Phone

Other Information

Enter Payment terms here

Description	
Service 1	

Labor: 10 hours at \$55 an hour

City, State, Zip Code

Customer Name

Please let us know if you have any questions. We are here to help! (Company Name and contact info here) Thank you for your business!