

My Company name

My company slogan

INVOICE

DATE: September 7, 2013

INVOICE #

INV-00-12345

VALID: October 7, 2013

CUSTOMER INFO

NAME: [Name]
[Company Name]
ADDRESS: [Current Address]
[City, ST ZIP Code]
[Phone]

COMPUTER INFO

MAKE: [Make]
MODEL # [Model #]
SERIAL # [Serial #]
ADDITION: [Addition]
BATTERY: [Battery]
REPLACEMENT DATE: [Date]
OTHER: [Other]

JOB DESCRIPTION

| | QUANTITY | RATE | AMOUNT |
|--------------------|----------|-------|--------|
| Screen Replacement | 2 | 75.00 | 150.00 |
| OS Backup/Restore | 2 | 25.00 | 75.00 |
| | | | - |
| | | | - |
| | | | - |
| | | | - |
| | | | - |

SUBTOTAL \$ 225.00

SALES TAX RATE % 0.00

| PART # | PART NAME | QTY | UNIT PRICE | AMOUNT |
|--------|-------------|-----|------------|--------|
| 12345 | Part Name 1 | 1 | 34.00 | 34.00 |
| 67890 | Part Name 2 | 2 | 17.50 | 35.00 |
| | | | | - |
| | | | | - |
| | | | | - |
| | | | | - |
| | | | | - |

SUBTOTAL \$ 69.00

SALES TAX RATE % 0.00

COMMENTS

Please include the invoice number as reference when paying online or by check.

TOTAL LABOUR \$ 225.00

TOTAL PARTS \$ 69.00

SALES TAX \$ 0.00

TOTAL \$ 294.00

Thank you for your business!

Make all checks payable to
My Company name

Should you have any inquiries concerning this invoice, please contact John Doe at 8-000-000-0000

123 Street, Springfield, Illinois, IL 60000

Tel: 800-000-0000 Fax: 800-000-0000 E-mail: info@mycompanyname.com Web: www.mycompanyname.com