

INVOICE

No	:	Project Period	:
Agreement No	:	Architect Name	:
Work Order No	:	Supervisor Name	:
Due Date	:		

Client :	[Company Name]	Project :	
	[Company Address]		
	[City, ST, ZIP Code]		
	Attn : _____		
	Phone : _____		
	Fax : _____		
	Email : _____		

Description of Work Performed	Completion	Amount

Payment To :
[Company Name]
[Bank Name]
[Bank Account]

Total	
State Tax	3%
Federal Tax	
Grand Total	

All materials are guaranteed to be as specified, and the above work was performed in accordance with the drawings and specifications provided, and was completed in a substantial workmanlike manner.