

Invoice No: [Invoice Number]  
Due Date: [Due Date]  
Invoice Date: [Date]



# Job Estimate

## **QUOTE ADDRESSED**

**TO:** [Customer Name]

Phone: [Customer Phone #]

Emil: [Customer E-mail]

Adress: [Customer Address]

## **TERMS AND CONDITIONS**

**Terms:** Payment is due at time of service unless otherwise specified. Net-30 terms available by prior arrangement. All work is guaranteed for 90 days from completion. Late payments subject to 1.5% monthly service charge. Disputes must be submitted within 10 days of invoice date.

<b>Sub-total :</b>	[Subtotal]
<b>Discount :</b>	[Discount]
<b>tax (10%) :</b>	[Tax%]
<hr/>	
<b>TOTAL</b>	[Total]

THANK YOU FOR YOUR BUSINESS  
1 (303) 880-4557