

your
logo

COMPANY NAME

Your slogan (if any)

[Street Address]
[City, ST ZIP Code]

Phone [509.555.0190]
Fax [509.555.0191]

INVOICE TO:

[Name]
[Company Name]
[Street Address]
[City, ST ZIP Code]
[Phone]

INVOICE #[100]

DATE: SEPTEMBER 7, 2016

	JOB DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL
01	Wedding pictures, June 16, 2016 Use this space to provide an extra description of your services, if required.	25	\$20	\$500
02	Job 2 Use this space to provide an extra description of your services, if required.	10	\$20	\$200
03				
04				
05				
<i>Please make all checks payable to [Your Company Name]. Payment is due within 30 days. If you have any questions concerning this invoice, feel free to contact [Name, phone number, e-mail]. Thank you for your business.</i>			SUBTOTAL	\$700
			SALES TAX 10%	\$70
			DISCOUNT 5%	-\$35
			GRAND TOTAL	\$735

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