## Company Name

[Street Address] [City, ST ZIP]

Phone: [000-000-0000] Fax: [000-000-0000] Website: somedomain.com

## INVOICE

DATE INVOICE # CUSTOMER ID DUE DATE 12/9/2019 [123456] [123] 1/8/2020

## **BILL TO**

[Phone]

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

DESCRIPTION	TAXED	AMOUNT
[Service Fee]		230.00
[Labor: 5 hours at \$75/hr]		375.00
[Parts]	Х	345.00

## OTHER COMMENTS

- 1. Total payment due in 30 days
- 2. Please include the invoice number on your check

Subtotal		950.00	
Taxable		345.00	
Tax rate	6.250%		
Tax due		21.56	
Other		***	
TOTAL	S	971.56	

Make all checks payable to [Your Company Name]

If you have any questions about this invoice, please contact
[Name, Phone #, E-mail]

Thank You For Your Business!