**Company Name**
Street Address
City, ST ZIP Code
Phone: Enter phone
Email: Enter email

**INVOICE**

|  |  |
| --- | --- |
| Customer NameCompany NameStreet AddressCity, ST ZIP CodePhone: Enter phone Email: Enter email | Invoice #NumberDate: Enter dateTerms: Due Upon Receipt |

|  |  |  |  |
| --- | --- | --- | --- |
| **DESCRIPTION** | **Item Quantity** | **Price/Unit** | **Amount** |
| Item 1 | 2 | $2.50 | $5.00 |
| Add item description for service or equipment. |   |   |   |
| Item 2 | 6 | $25.00 | $150.00 |
| Add item description for service or equipment. |   |   |   |
| Item 3 | 3 | $75.00 | $225.00 |
| Add item description for service or equipment. |   |   |   |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |   |   |   |
|  | TOTAL |  | $380.00 |
|  | AMOUNT PAID |  | $190.00 |
|  | **AMOUNT DUE** |  | **$190.00** |

Make all checks payable to Company Name
Overdue accounts subject to 1% service charge per month.

Thank you for your business!