

YOUR COMPANY NAME
 123 MAIN STREET
 YOUR TOWN, STATE AND ZIP

JOB INVOICE

1001

(123) 456-7890

TO _____

TERMS

PHONE	DATE OF ORDER
ORDER TAKEN BY	CUSTOMER'S ORDER NUMBER
<input type="checkbox"/> DAY WORK	<input type="checkbox"/> CONTRACT
<input type="checkbox"/> EXTRA	
JOB NAME NUMBER	
JOB LOCATION	
JOB PHONE	STARTING DATE

QTY.	MATERIAL	PRICE	AMOUNT	DESCRIPTION OF WORK
SAMPLE				
OTHER CHARGES				
				TOTAL OTHER
			LABOR	HRS. RATE AMOUNT
				TOTAL LABOR
DATE COMPLETED		TOTAL MATERIALS		TOTAL MATERIALS
				TOTAL OTHER

Work ordered by _____

Signature _____

I hereby acknowledge the satisfactory completion of the above described work.

Thank You

TAX

TOTAL