[Your Company Name]

[Your Company Slogan]

[Street Address]
[City, ST ZIP Code]
Phone [(509) 555-0190] Fax [(509) 555-0191]

INVOICE #[100]

DATE: OCTOBER 9, 2011

INVOICE

TO: [Name] [Company Name] [Street Address

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

FOR: [Project or service description] [P.O. #]

DESCRIPTION	HOURS	RATE	AMOUNT
	i i	The state of the s	
			_
		TOTAL	

Make all checks payable to [Your Company Name]
Total due in 15 days, Overdue accounts subject to a service charge of 1% per month.

Thank you for your business!