**PERFORMA INVOICE**

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| **COMPANY NAME**123 Main StreetHamilton, Oh 44416(321) 456-7890**[Email Address]** | **Date of invoice:** **[Date]****Invoice no.:** **[#]****Date due: [Date]****Amount:** **[Amount]** |
| **CUSTOMER NAME****[Name/Department]****[Company Name]**123 Main StreetHamilton, Oh 44416(321) 456-7890**[Email Address]** |  |

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| **DESCRIPTION OF WORK** | **HOURS** | **RATE** | **AMOUNT** |
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|  |  | **TOTAL** |  |

**Terms and remarks**

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Please make check payable to Your Company Name.

**THANK YOU**