**PERFORMA INVOICE**

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| **COMPANY NAME**  123 Main Street  Hamilton, 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 Street  Hamilton, 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**