

Business Name

INVOICE

Street Address, City, ST ZIP

Phone: (000) 000-0000 Fax: (000) 000-0000

INVOICE # 00-000000

DATE 6/24/2013

Customer INFO

Name
Street Address
City, ST ZIP
Phone: (000) 000-0000

Vehicle INFO

Year:
Make:
Model:
Color:
Mileage:

SERVICES PERFORMED

AMOUNT

| | |
|-------|--------|
| Labor | 150.00 |
|-------|--------|

| | |
|---------------------------|--------|
| Labor: 5 hours at \$75/hr | 375.00 |
|---------------------------|--------|

| | | |
|----------|----|--------|
| SUBTOTAL | \$ | 525.00 |
|----------|----|--------|

| | |
|----------|--------|
| TAX RATE | 0.000% |
|----------|--------|

PART NAME

PART

QTY

UNIT PRICE

AMOUNT

| | | | | |
|-------|---------|---|-------|--------|
| Parts | 2445689 | 5 | 75.00 | 375.00 |
|-------|---------|---|-------|--------|

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| | | |
|----------|----|--------|
| SUBTOTAL | \$ | 375.00 |
|----------|----|--------|

| | |
|----------|--------|
| TAX RATE | 7.500% |
|----------|--------|

OTHER COMMENTS

1. Total payment due in 30 days
2. Please include the invoice number on your check
3. Please mail your check to the address listed above

| | | |
|----------------|----|--------|
| TOTAL SERVICES | \$ | 525.00 |
|----------------|----|--------|

| | | |
|-------------|----|--------|
| TOTAL PARTS | \$ | 375.00 |
|-------------|----|--------|

| | | |
|-----------|----|-------|
| TOTAL TAX | \$ | 28.13 |
|-----------|----|-------|

| | | |
|-------|----|--------|
| TOTAL | \$ | 928.13 |
|-------|----|--------|

Thank You For Your Business!

Make all checks payable to:
Your Company Name