## PLUMBING INVOICE

			INVOICE DATE	WORK ORDER NO.	INVOICE NO.
PLUMBER					
COMPANY NAME		LABOR	HOURS	RATE	TOTAL
CONTACT NAME					
ADDRESS					
ADDRESS					
ADDRESS					
TELEPHONE					
EMAIL					
CLIENT				TOTAL	
COMPANY NAME		MATERIALS	QTY	UNIT COST	TOTAL
CONTACT NAME					
ADDRESS					
ADDRESS					
ADDRESS					
TELEPHONE					
EMAIL					
CONFIRMATION		TERMS + REMARKS		TOTAL	
CLIENT			-		
(SIGNATURE)				SUBTOTAL	
DATE			enter percentage	TAX RATE	
Please make check payable to				TOTAL TAX	
				OTHER	
For questions concerning this invoice, please contact				GRAND TOTAL	
		enter in	nitial payment amount	LESS PAYMENT	
		THANK YOU		TOTAL DUE	

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