

PLUMBING INVOICE TEMPLATE



PLUMBING INVOICE

INVOICE DATE WORK ORDER NO. INVOICE NO.

PLUMBER

COMPANY NAME
CONTACT NAME
ADDRESS
ADDRESS
ADDRESS
TELEPHONE
EMAIL

LABOR	HOURS	RATE	TOTAL
TOTAL			

CLIENT

COMPANY NAME
CONTACT NAME
ADDRESS
ADDRESS
ADDRESS
TELEPHONE
EMAIL

MATERIALS	QTY	UNIT COST	TOTAL
TOTAL			

CONFIRMATION

CLIENT
(SIGNATURE)
DATE

TERMS + REMARKS

TOTAL	
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Please make check payable to

For questions concerning this invoice, please contact

enter percentage

enter initial payment amount

SUBTOTAL	
TAX RATE	
TOTAL TAX	
OTHER	
GRAND TOTAL	
LESS PAYMENT	
TOTAL DUE	

THANK YOU

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