INVOICE

[Your Business Name]
[Street address]
[City, State ZIP]
[email@yourbusiness.com]
[(555) 555-0123]

BILL TO

[Client Name]
[Street address]
[City, State ZIP]
[client@email.com]

Invoice number:	INV-0001
Invoice date:	10/27/2026
Due date:	11/11/2026
Terms:	Net 15
Date of service:	[Date]

SERVICE	UNIT PRICE	QUANTITY	AMOUNT
Service call On-site visit	$75.00	1	**$75.00**
Labor Per hour	$80.00	3	**$240.00**
Parts and supplies	$52.00	1	**$52.00**

NOTES/MEMO

Thank you for your business. Payment due within 15 days by bank transfer, card or check.

Subtotal:	$367.00
Amount due:	**$367.00**