|  |  |
| --- | --- |
| Logo placeholder | QUOTE |
| Company NameCompany Slogan | INVOICE # No.Date: Date |
| Street Address, City, ST ZIP CodePhone Phone Fax FaxEmail | Expiration Date Date |

|  |  |  |
| --- | --- | --- |
| To | Contact NameCompany NameStreet AddressCity, ST ZIP CodePhoneCustomer ID No. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| salesperson | job | payment terms | due date |
|  |  | Due on receipt |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| description | QTY | unit cost | hr / rate | line total |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Subtotal |  |
|  |  | discount |  |
|  |  | Tax  |  |
|  |  | Total |  |

|  |
| --- |
| Thank you for your business! |