CONTRACTOR'S JOB INVOICE

DATE: _____ **INVOICE #:** _____

(Contractor's Name) (Owner's Name)

(Contractor's License Number) (Job Address)

(Contractor's Address) (City, State & Zip)

(City, State & Zip) (Lot) (Block) (Tract)

(Contractor's Telephone) (Contractor's FAX) (Owner's Telephone) (Owner's FAX)

Email _____ (Contractor's) **Email** _____ (Owner's)

☐ Down Payment ☐ Progress Payment ☐ Final Payment Terms: _____

☐ Day Work ☐ Contract ☐ Extra Start/Date: _____ End/Date: _____

DESCRIPTION OF WORK PERFORMED

(Describe Labor, Work, Material and Equipment Furnished)

SUMMARY

LABOR : _____

MATERIALS : _____

CHANGE ORDER # _____ : _____

_____ : _____

_____ : _____

_____ : _____

_____ : _____

SUBTOTAL: _____

LESS PREVIOUS PAYMENTS: _____

LESS RETENTION _____ %: _____

TAX: _____

GRAND TOTAL: _____

Submitted: **X** _____ (Contractor's Signature) _____ (Date)

Customer Approval: **X** _____ (Owner's Signature) _____ (Date)

SAMPLE

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