

# ELECTRICAL SERVICE INVOICE

## DETAILS

DATE: \_\_\_\_\_

INVOICE NO. \_\_\_\_\_

TERMS: \_\_\_\_\_

## FROM

COMPANY: \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

## BILL TO

COMPANY: \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

LABOR	HOURS	RATE (\$/HR)	AMOUNT (\$)
<b>TOTAL</b>			

REQUIRED MATERIALS / PRODUCTS	QUANTITY	UNIT PRICE	AMOUNT (\$)
<b>TOTAL</b>			

NOTES / SPECIAL INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBTOTAL**

**DISCOUNT**

**TAX / VAT**

**TOTAL**

