

# DRYWALL REPAIR INVOICE

**DETAILS**

DATE: \_\_\_\_\_  
 INVOICE NO. \_\_\_\_\_

**FROM**

COMPANY: \_\_\_\_\_  
 ATTN: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE: \_\_\_\_\_  
 ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

**BILL TO**

COMPANY: \_\_\_\_\_  
 ATTN: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE: \_\_\_\_\_  
 ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

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

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

**NOTES:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>SUBTOTAL</b>	
<b>DISCOUNT</b>	
<b>TAX / VAT</b>	
<b>TOTAL</b>	

THANK YOU FOR YOUR BUSINESS

