

FLOORING INSTALLATION 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: _____

| LABOR | HOURS | RATE (\$/HR) | AMOUNT (\$) |
|--------------|-------|--------------|-------------|
| | | | |
| TOTAL | | | |

| FLOORING MATERIALS / PRODUCTS | QUANTITY | UNIT PRICE | AMOUNT (\$) |
|-------------------------------|----------|------------|-------------|
| | | | |
| TOTAL | | | |

NOTES: _____

| | |
|------------------|--|
| SUBTOTAL | |
| DISCOUNT | |
| TAX / VAT | |
| TOTAL | |

THANK YOU FOR YOUR BUSINESS

