

DAYCARE (CHILD CARE) INVOICE

FROM

Name: _____
 Company: _____
 Street Address: _____
 City, State, Zip: _____
 Phone: _____
 E-Mail: _____

DATE: _____

INVOICE #: _____

BILL TO

Name: _____
 Company: _____
 Street Address: _____
 City, State, Zip: _____
 Phone: _____
 E-Mail: _____

DESCRIPTION		AMOUNT (\$)
<p>NOTES</p> <p>_____</p> <p>_____</p>		SUBTOTAL
		DISCOUNT
		TAX / VAT
		SHIPPING
		TOTAL

THANK YOU FOR YOUR BUSINESS

