

Your Company Name

123 Your Street
Your City, ST 00000
(555) 010-0100
office@yourcompany.example
www.yourcompany.example
License #LIC-000000
Licensed and insured — certificate on request

INVOICE

No. **INV-1001**
Date **Sep 1, 2026**
Due **Sep 15, 2026**

BILL TO

Client Name

456 Client Street
Their City, ST 00000
(555) 010-0200
client@example.com

DESCRIPTION	QTY	UNIT	RATE	TAX	AMOUNT
MATERIALS					
Drywall, 1/2 in., hung and fastened	400	sq ft	\$1.15	T	\$460.00
Moisture-resistant board, wet areas	400	sq ft	\$1.65	T	\$660.00
Joint compound, tape and corner bead	400	sq ft	\$0.45	T	\$180.00
Primer, drywall sealer	5	gal	\$48.00	T	\$240.00
LABOR					
Tape and finish to Level 4	400	sq ft	\$1.95		\$780.00
Skim coat to Level 5, adder	400	sq ft	\$1.40		\$560.00
Knockdown texture, sprayed	400	sq ft	\$0.85		\$340.00
Orange-peel texture, sprayed	400	sq ft	\$0.75		\$300.00
Subtotal					\$3,520.00
Tax (8.25%)					\$127.05
Total					\$3,647.05

T = taxable line

HOW TO PAY

Check or Zelle to Your Company Name. Please reference the invoice number.

NOTES

Work completed as described on estimate EST-1001.

TERMS

Payment is due within 14 days of the invoice date. Thank you for your business.

Accepted by

Date