

Business Service Invoice

**YOUR LOGO
HERE**

Your Company Name

Street address

CT, ST zip code

Phone

Fax

email

Date: August 22, 2015

INVOICE # [100]

To: [Name]

[Company Name]

[Street Address]

[City, ST ZIP Code]

[Phone]

Customer ID [ABC12345]

Description	Hours	Rate per hour	Total
		Subtotal	
		Sales Tax	
		Total	