Modeling Bill Format

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Template#: c5002
Title: Modeling Bill Format
Category: Service
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Model Name

INVOICE

Street Address

City, ST ZIP Code   **DATE:**

Phone Number,Web Address, etc.   **INVOICE #**

Bill To

P.O. #	Sales Rep. Name	Ship Date	Ship Via	Terms	Due Date

Description	Tax	Hours	Rate/Hour	Amount
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			

SUBTOTAL	-
GST 6.50%	-
SHIPPING & HANDLING	-
TOTAL	-
PAID	-
TOTAL DUE	-

THANK YOU FOR YOUR BUSINESS!