

YOUR COMPANY NAME 123 MAIN STREET CITY, STATE, ZIP CODE (123) 456-0987

SUBCONTRACTOR INVOICE

DATE _____

		INVOICE NO	
FROM	BILL TO		
COMPANY	COMPANY		
NAME	NAME		
ADDRESS	ADDRESS		
CITY, STATE	CITY, STATE _		
ZIP	ZIP		_
PHONE	PHONE		
E-MAIL	E-MAIL		
DESCRIPTION			AMOUNT (\$)
NATEO		CURTOTAL	
NOTES		SUBTOTAL	
		DISCOUNT	
		TAX / VAT	
		TOTAL	