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# INVOICE

Invoice No: \_\_\_\_\_

Date: \_\_\_\_\_

Due Date: \_\_\_\_\_

P.O. Number: \_\_\_\_\_

## CLIENT / BILL TO

\_\_\_\_\_  
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## JOB SITE / PROPERTY ADDRESS

\_\_\_\_\_  
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DESCRIPTION OF MAINTENANCE WORK / SERVICES	QTY / HRS	UNIT PRICE	TOTAL
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Subtotal: \_\_\_\_\_

Tax Rate: \_\_\_\_\_

Tax Amount: \_\_\_\_\_

**Total Due:** \_\_\_\_\_

## Payment Terms & Conditions

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CUSTOMER AUTHORIZED SIGNATURE

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SERVICE TECHNICIAN / PROVIDER SIGNATURE