Your Company Name

Address

City, State Zip

Phone Number

TO Company Name

 Address

 City, State Zip

|  |  |
| --- | --- |
| Job | Payment Terms |
| Job Description (ex: hours worked in December) | Net 30, Net 60, etc. |

|  |  |
| --- | --- |
| Description Qty/Rate | Total |
| **Line Item 1 Description 1/30.00****Line Item 2 Description 5/100.00** |  $30.00 $500.00        |

 **TOTAL DUE $530.00**

Please remit all checks to address

Thank you for your business!