

|    |                         | -   |  |
|----|-------------------------|-----|--|
| In | $\mathbf{V} \mathbf{O}$ | To: |  |
|    |                         |     |  |

**Invoice No** 

Date

| PRODUCT / SERVICE | QTY / HRS | PRICE / RATE | AMOUNT |
|-------------------|-----------|--------------|--------|
|                   |           |              |        |
|                   |           |              |        |
|                   |           |              |        |
|                   |           |              |        |
|                   |           |              |        |
|                   |           |              |        |

| PAYMENT METHOD | Sub Total: |  |
|----------------|------------|--|
|                | Tax:       |  |
|                | Discount:  |  |
|                | TOTAL:     |  |

Thank You

Signature