[Company Name]	INVOICE FASY INVOICE MA	SPARK INVOICE Easy Invoice Maker	
[Street Address]	Lasy Invoice Ma	U EWYER U	
[City, ST ZIP]			
Phone: (000) 000-0000	RECEIPT#	DATE	
· .	2034	2/21/2018	
BILL TO	CUSTOMER ID	TERMS	
[Name]	564	Que Upon Receipt	
[Company Name]			
[Street Address]			
[City, ST ZIP]			
[Phone]			
[Email Address]			
DESCRIPTION	QTY UNIT PRICE	AMOUNT	
Service Fee	1 25	0 250	
Labor: 5 hours at \$75/hr	5 7	5 375	
New client discount	-5	0 -50	
		-	
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		-	
		-	
		-	
		-	
		-	
Thank you for your business!	SUBTOTAL	575	
	TAX RATE	4.25%	
	TAX	24.4375	
	TOTAL	599.4375	
If you have any guest	ons about this invoice, please contact		
	ons about this invoice, please contact one, email@address.com]		