

# Interior Painting Service Invoice

Invoice #:

Date:

Service Provider:

Client Name:

Address:

Contact:

Description	Hours	Rate	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total</b>	<input type="text"/>		

Notes:

Thank you for your business!