

Contractor Name
 Company Name CA Contractor License #
 Business Address
 Phone: (###) ###-
 #### Fax: (###)
 ###-####
 Email: name@domain.com
 Website: www.site.com

Sample Invoice

Date [Enter a date]
 Invoice # [100]
 Date Work Performed [Start date/ End date]

TO
 Homeowner
 Mailing Address
 Phone Number

FOR:
 Seismic Retrofit of House
 at: Physical Location of
 House

Salesperson	Job	Payment Terms	Due Date

Materials and Equipment			
Materials	Plywood or Oriented Strand Board Sheathing (Number of Sheets and per unit cost)		
	Lumber (2x studs, sills, and blocking)		
	Nails and fasteners		
	Hardware (framing clips and foundation anchors)		
	Anchor bolts (including nuts and washers)		
	Adhesive for Anchor bolts (if required)		
Equipment	Rented specifically for the project		

Subtotal

Sales Tax

Total Materials and
 Equipment

Permit and Service Expenses:			
Permit Fee			
Labor	Hours, hourly rate and total		
Overhead and Profit			

Subtotal Permit and Service
 Expenses

Subtotal Materials and
 Equipment

Total

Amount Paid

EBB Reimbursement to go to: Homeowner

Contractor

**Thank you for your
 business!**