WELDING INVOICE

Welder's Name:	
Invoice #:	
Issue Date:	
Due Date:	

Service Tax:	
Salse Tax:	

From

[Company Name]
[Attn]
Street Address]
City, State, Zip]
Phone]
E-Mail]

То	
[Company Nam	ne]
[Attn]	
[Street Address]	
[City, State, Zip]	
[Phone]	
[E-Mail]	

	Hours	Labor	Rate	Amount
<u>v</u>				
irial				
Materials				
Ν				

	Qty	Item/Product	Rate	Amount
Labor				
La				

Notes:	Labo	r
	Materials	5
	Та	c
	Tota	I