|  |  |
| --- | --- |
| <Company Name> | **ESTIMATE** |
| <123 Street Address, City, State, Zip/Post> |  |
| <Website, Email Address> |
| <Phone Number> |
|  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **BILL TO** |  | **SHIP TO** | **Estimate No:** | #INV0001 |
| <Contact Name> |  | <Name / Dept> | **Date:** | 11/11/11 |
| <Client Company Name> |  | <Client Company Name> | **Valid For:** | 14 Days |
| <Address> |  | <Address> |  |  |
| <Phone, Email> |  | <Phone> |  |  |
|  |  |  |  |  |
| **DESCRIPTION** | **QTY** | **UNIT PRICE** | **TOTAL** |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | 0.00 |
|  |  |  | **SUBTOTAL** | 0.00 |
| Thank you for your business! |  | **DISCOUNT** | 0.00 |
|  | **SUBTOTAL LESS DISCOUNT** | 0.00 |
|  | **TAX RATE** | 0.00% |
|  | **TOTAL TAX** | 0.00 |
|  | **SHIPPING/HANDLING** | 0.00 |
|  |  | **Quote Total** | **$ -** |
|  |
| **Terms & Instructions** |
| <Add payment requirements here, for example deposit amount and payment method> |
| <Add terms here, e.g: warranty, returns policy...> |
| <Include project timeline> |
|  |  |  |  |  |