

**[Insert Company Name]**

ABN: [Insert ABN]

# INVOICE

[Company Contact Person]

[Company Address]

Phone [Phone Number]

Fax [Fax Number]

INVOICE #[INVOICE NUMBER]

DATE: [INVOICE DATE]

**TO:**

[Name]

[Street Address]

[Suburb STATE Post Code]

[Phone Number]

**ADDRESS (WHERE WORKS WERE CARRIED OUT): [ENTER CLIENT PROPERTY ADDRESS DETAILS]**

QUANTITY	DESCRIPTION	UNIT PRICE	GST	TOTAL
	<b>[Complete All Table Fields]</b>			

**Payment terms and conditions [eg. strictly 7 days, payment on completion, etc.]**

**Northern Territory Government HOME RENOVATION GRANT PROGRAM voucher will be accepted as payment, subject to Program Terms and Conditions, available at <https://nt.gov.au/property/homeowner-incentives/first-home-owners/home-renovation-grant>**

**For Home Renovation Grant Program Purposes Only**

Description	Price (ex GST)	Price (inc GST)
Total value of goods/materials	<b>[insert price]</b>	<b>[insert price]</b>
Total value of remainder (inc. labour)	<b>[insert price]</b>	<b>[insert price]</b>

SUBTOTAL (INC GST)

NTG VOUCHER AMOUNT (INC GST)

SUBTOTAL LESS NTG VOUCHER AMOUNT (INC GST)

LESS DEPOSIT PAID (INC GST)

LESS DISCOUNT

**BALANCE DUE EXCLUDING GST**

**GST ON BALANCE DUE**

**TOTAL DUE**

If you have any questions concerning this invoice, contact: [Insert Name] at [Phone Number] or [Email Address]