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Agency Billing Template

BoostExcel.com

Template#: c3004

Title: Agency Billing Template

Category: Service

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BILL TO

#

Name

Address

Car Insurance Agency (Your Company Name)

INVOICE

Car Insurance Agency Street Address

Car Insurance Agency City, ST ZIP Code

DATE:

Car Insurance Agency Phone Number, Web Address, etc.

INVOICE #:

P.O. #

Sales Rep.

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| | | Line Total |
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| PST | 8.00% | - |
| SST | 6.00% | - |
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| | PAID | - |
| | TOTAL DUE | - |
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