Sample Roofing Co.

1400 Industrial Pkwy
Springfield, TN 37172
(615) 555-0142
office@sampleroofing.example
sampleroofing.example
License Roofing license 0000000 (sample)

RECEIPT

PAID

Number	INV-9104
Quote	Q-9104
Date	October 2, 2026
Job	Insurance re-roof

BILL TO

Northside Medical Center
900 Hospital Dr, Springfield, TN 37172
(615) 555-0355
facilities@northside.example

SERVICE ADDRESS

900 Hospital Dr, Springfield, TN 37172

Description	Qty	Price	Amount
Impact-rated shingle roof, installed (per square)	31	$585.00	$18,135.00
Permit and dump fees	1	$250.00	$250.00

Subtotal	$18,385.00
Tax (0%)	$0.00
Total	**$18,385.00**
Paid 10/2/26 (paypal)	−$18,385.00
Balance due	**$0.00**