

Your Business Name

Address
Address 2
Phone Number

INVOICE

SOLD TO:
Person
Company Name
Address
City, Postcode

INVOICE NUMBER 536524
INVOICE DATE August 16, 2014
YOUR ORDER NO. / REF
CONTACT NAME Name

| QUANTITY | | DESCRIPTION | UNIT PRICE | | AMOUNT |
|----------|--|-------------|---------------------|-----|----------|
| 1 | | Service | 250.00 | £ | 250.00 |
| 120 | | Product | 10.00 | £ | 1,200.00 |
| | | | SUBTOTAL | £ | 1,450.00 |
| | | | VAT | N/A | |
| | | | | £ | 1,450.00 |
| | | | TOTAL AMOUNT TO PAY | | |

PLEASE MAKE PAYMENTS TO:

Bank Name
Account Name
Account Number
Sort Code

PAYMENT TERMS : PAYMENT IS DUE WITHIN XXX DAYS OF INVOICE DATE

THANK YOU FOR YOUR BUSINESS!