

INVOICE

FROM

Name: _____
Address: _____
Email: _____
Phone: _____

BILL TO

Name: _____
Address: _____
Email: _____
Phone: _____

INVOICE #	INVOICE DATE	TERMS	DUE DATE
_____	_____	_____	_____

DESCRIPTION	QTY	UNIT PRICE (US\$)	AMOUNT (US\$)

Subtotal: \$ _____
Sales tax (if any) (____%): \$ _____
TOTAL DUE: \$ _____

Payment instructions: _____

Notes: _____
