

[Business Name]

[Business Address 1]

[City], [State] [Postal Code]

[Business Phone Number]

[Business Email Address]

Invoice

Bill To [Client Name]
 [Client Address line 1]
 [City], [State] [Postal code]

Invoice Number 2001321
Date 03/04/2024

Description	Quantity	Unit price	Amount
Product 1	5	Rs. 100	Rs. 500
product 2	3	Rs. 20	Rs. 60
service 1	1	Rs. 25	Rs. 25
service 2	7	Rs. 50	Rs. 350
Total			Rs. 935