

INVOICE



INVOICE NO.
100

DATE
February 23, 2016

DUE DATE
March 10, 2016

Bill From
[Name]
[Company Name]
[Street Address]
[City, ST ZIP Code]
[Phone]

Bill To
[Name]
[Company Name]
[Street Address]
[City, ST ZIP Code]
[Phone]

ID	DESCRIPTION	QUANTITY	PRICE, \$	TOTAL \$
01	Advanced LCD screen assembly in person	2	450.00	900.00
02	Driver board assembly digital keypad for LCD	5	320.00	1,600.00
03	CC camera lens assembly	6	250.00	1,500.00
04	Integrating Board Driver Digital keypad	4	100.00	400.00
			Subtotal	\$7,510.00
			Sales Tax 8%	\$600.80
			SHH	\$50.00
			Total Due	\$8,160.80

Please make a payment to
Beneficiary Name: [Company Name]
Beneficiary Account Number: [1234567890]
Bank Name and Address: [Bank Name and Address]
Bank-Swift Code: [1234567890]
IBAN Number: [1234567890]

Terms and conditions
Thank you for your business. Please send payment within 30 days of receiving this invoice. There will be a 1.5% interest charge per month on late invoices.