

# INVOICE

Invoice Number:

Date:

**BILL From:**

Address :

Contact Details:

**BILL TO:**

**PAYMENT INFORMATION:**

Bank:

Address : 170 Nyanda Street, 7210  
Contact Details: 021 610 7231

Account Name: Absa Bank  
Account: 123498765

ITEM	DESCRIPTION	UNIT PRICE	AMOUNT
1.	Every day Milk 1l	14,50	21,90

Sub Total: 14,50

Total: 21,90