

INVOICE



<Your Company Name>
<123 Street Address>
<City, State, Zip/Post Code>
<Phone Number, Email>

DATE

INVOICE NO.

<Payment terms (due on receipt, due in X days)>

BILL TO

<Contact Name>
<Client Company Name>
<Address>
<Phone>

SHIP TO

<Name / Dept>
<Client Company Name>
<Address>
<Phone>

DESCRIPTION	QTY	UNIT PRICE	TOTAL
			0.00
			0.00
			0.00
			0.00
			0.00
			0.00
Remarks / Payment Instructions:		SUBTOTAL	0.00
		DISCOUNT	0.00
		TAX RATE	0.00%
		TOTAL TAX	0.00
		SHIPPING/HANDLING	0.00
Balance Due		RM -	