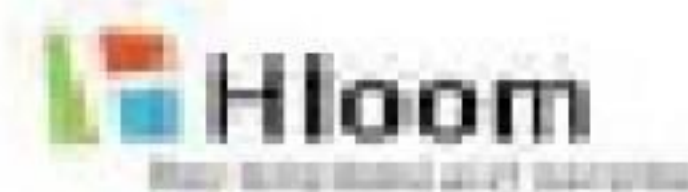


INVOICE



INVOICE NUMBER

000100

INVOICE DATE

Feb 23, 2016

DUE DATE

March 22, 2016

BILL TO:

Name

Company Name

Street Address

City, ST ZIP Code

BILL FROM

Name

Company Name

Street Address

City, ST ZIP Code

ID	DESCRIPTION	QTY	PRICE	TOTAL
01	Dolor handrerit	2	\$150.00	\$300.00
02	Felis et imperdiet erosumod	2	\$120.00	\$240.00
03	Purus ipsum pretium metus	1	\$1,000.00	\$1,000.00
04	In lacinia nulla nisl eget sapien	1	\$800.00	\$800.00
05	Donec ut est in lectus	1	\$100.00	\$100.00
			Subtotal	\$2,740.00
			Sales Tax 8%	\$219.20
			Shipping & Handling	\$50.00
			TOTAL DUE	\$3,019.20

BENEFICIARY NAME: [COMPANY NAME]

BENEFICIARY ACCOUNT NUMBER: [1234567890]

BANK NAME AND ADDRESS: [BANK NAME AND ADDRESS]

BANK SWIFT CODE: [1234567890]

IBAN NUMBER: [1234567890]

PLEASE SEND PAYMENT WITHIN 30 DAYS OF RECEIVING THIS INVOICE. THERE WILL BE A 1.5% INTEREST CHARGE PER MONTH ON LATE INVOICES.

THANK YOU FOR YOUR BUSINESS!