## **BASIC INVOICE TEMPLATE**

## **YOUR LOGO**

INVOICE

Company Name		DATE
123 Main Street		
Hamilton, OH 44416		INVOICE NO.
(321) 456-7890		
Email Address		
	Paym	ent due upon receipt.
BILL TO	SHIP TO	
ATTN: Name / Dept	ATTN: Name / Dept	
Company Name	Company Name	
123 Main Street	123 Main Street	
Hamilton, OH 44416	Hamilton, OH 44416	
(321) 456-7890	(321) 456-7890	
Email Address		
DESCRIPTION		TOTAL
Remarks / Instructions:	SUBTOTAL	0.00
	enter total amount DISCOUNT	0.00
	SUBTOTAL LESS DISCOUNT	0.00
	enter percentage TAX RATE	0.00%
	TOTAL TAX	0.00
	SHIPPING/HANDLING	0.00
Please make check payable to Your Company Name.	OTHER	0.00
THANK YOU	TOTAL	\$ -

For questions concerning this invoice, please contact Name, (321) 456-7890, Email Address www.yourwebaddress.com