[Business Name] Invoice

[Business Address 1]
[City], [State] [Postal Code]

[Business Phone Number] [Business Email Address]

Bill To Name: Bob Invoice Number 2001321

Address: 123 E Main St **Date** 11/21/2020

ohio, NV 46876

Description	Quantity	Unit price	Amount
Product 1	5	Rp 100	Rp 500
product 2	3	Rp 20	Rp 60
service 1	1	Rp 25	Rp 25
service 2	7	Rp 50	Rp 350

Total Rp 935