**INVOICE**

**Your Company Name**123 Business Street  
City, State ZIP Code  
Phone: (123) 456-7890  
Email: contact@yourcompany.com

|  |  |
| --- | --- |
| Invoice Number | INV-0025 |
| Invoice Date | 2025-08-19 |
| Due Date | 2025-08-31 |
| Client | EURL ARCODYM HAOUCHE SEBIATTE ZONE ROUIBA |

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Quantity | Unit Price | Total |
| CLIM MSTAG11B-12 | 1 | $60064.03 | $60064.03 |

|  |  |
| --- | --- |
| Subtotal | $60064.03 |
| Tax (19.0%) | $11412.17 |
| Total | $71476.20 |
|  |  |

**Payment Terms:**

Payment is due within 30 days. Please make checks payable to Your Company Name.

*Thank you for your business!*