



Firstname Lastname, occupation
Streetname 1
1234 AB City Name
Phone: 06 123 456 78
Email: test@test.nl
Url: <http://www.bammerlaan.nl>

To:
Customer Name
Address 1
1234 AB City

Invoice number
46

Date
May 27, 2020

Invoice

Dear sir/madam,

Please transfer the amount due within 30 days to bank account number NL12 TEST 1234 5678 90 in the name of **Firstname Lastname, occupation** giving your name and the invoice number.

Date	Description	Amount	Unit price	Amount without tax	Tax rate	Tax amount	Total price with taxes
2020-01-22	Product 1	1	€ 55,00	€ 55,00	9%	€ 4,95	€ 59,95
2020-01-23	Product 1	1	€ 55,00	€ 55,00	9%	€ 4,95	€ 59,95
2020-01-24	Product 2	1	€ 170,00	€ 170,00	9%	€ 15,30	€ 185,30
2020-01-25	Product 2	1	€ 170,00	€ 170,00	9%	€ 15,30	€ 185,30
2020-01-26	Product 2	1	€ 170,00	€ 170,00	9%	€ 15,30	€ 185,30
Sub-total				€ 620,00		€ 55,80	€ 675,80
Amount due							€ 675,80

Yours sincerely,

Firstname Lastname, occupation