

**Client Name**  
789 Maple St  
City  
Country

**Your Company**  
123 Main St  
City  
Country  
phone 123-456-7890  
email billing@company.com  
website www.company.com  
kvk 12345678  
vat NL123456789B01  
iban NL00BANK1234567890

**Invoice**

**Client Id** CUST001  
**Invoice Number** INV001  
**Invoice Date** December 6, 2024

Expiry Date January 5, 2025

Description	Quantity	Unit	Rate	VAT%
Consulting services	160.0	Hours	€ 140,00	21%

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Amount excl. VAT	€ 22.400,00
VAT	€ 4.704,00
<b>Total Amount</b>	<b>€ 27.104,00</b>

Please transfer the total amount of € 27.104,00 by January 5, 2025), to NL00BANK1234567890, referencing CUST001-INV001.