

**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** October 31, 2025

Expiry Date November 30, 2025

Description	Quantity	Unit	Rate	VAT%
Consulting services	160	Hours	€ 140,00	21%
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 November 30, 2025, to NL00BANK1234567890, referencing CUST001-INV001.