**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** 

August 1, 2024

Expiry Date August 31, 2024

**Description**Consulting services

Quantity

Unit

Rate

VAT%

160.0

Hours

€ 140,00

21%

Amount excl. VAT € 17.696,00

VAT

€ 4.704,00

**Total Amount** 

€ 22.400,00

Please transfer the total amount of € 22.400,00 by August 31, 2024, to NL00BANK1234567890, referencing CUST001-INV001.