| INVOICE | |  |  |  |
| --- | --- | --- | --- | --- |
| <Your Company Name> |  |  |  | **DATE** |
| <123 Street Address> |  |  |  |  |
| <City, State, Zip/Post Code> |  |  |  | **INVOICE NO.** |
| <Phone Number, Email> |  |  |  |  |

|  |  | *<Payment terms (due on receipt, due in X days)>* | | |
| --- | --- | --- | --- | --- |
| **BILL TO** |  | **SHIP TO** |  |  |
| <Contact Name> |  | <Name / Dept> |  |  |
| <Client Company Name> |  | <Client Company Name> |  |  |
| <Address> |  | <Address> |  |  |
| <Phone> |  | <Phone> |  |  |

| **DESCRIPTION** | | **QTY** | **UNIT PRICE** | **TOTAL** |
| --- | --- | --- | --- | --- |

| **INSTALLMENTS** | **Payment DATE** |  |  |  |
| --- | --- | --- | --- | --- |