

# Your Company Name

Your Address  
City, State Zip

Invoice No. 123456  
Invoice Date 01/01/2016

Client Name  
Address  
City, State Zip

Notes

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| Item   | Quantity | Price | Total  |
|--------|----------|-------|--------|
| Item 1 | 1        | 40.00 | 40.00  |
|        |          |       |        |
|        |          |       |        |
|        |          |       |        |
|        |          | TOTAL | 200.00 |