



Company Name
Primary Business Address
Address 2
Phone: 555-555-5555
Fax: 555-555-5555
E-mail: someone@example.com

Invoice

Date	1/1/2010
Order ID	Text
TAX NUMBER	Text
Customer VAT	Text

Billing Address

Name
Title
Primary Address
Address 2
Phone: 555-555-5555
Fax: 555-555-5555
E-mail: someone@example.com

Recipient Information

Name
Title
Primary Address
Address 2
Phone: 555-555-5555
Fax: 555-555-5555
E-mail: someone@example.com

Product	Quantity	Price	Item Total	Tax Rate	Tax Net
<i>(This area contains a large diagonal watermark reading "Draft")</i>					

Other Comments or Special Instructions

- 1) Total payment due in 30 days
2) Please include the invoice number on your check

Subtotal:	
Processing Fees:	
Taxes:	
Total:	

Make all checks payable to [Your Company Name]

If you have any questions about the invoice, please contact (Name, Phone #, E-mail)

Thanks You For Your Business!