Your logo here

**INVOICE**

**Street address**

**City, ST ZIP**

**Phone: <Phone number> Fax: <Fax number>**

**<Email>**

**Date:**

**Invoice #:**

**For:**

12/23

1111

PO # 123456

|  |
| --- |
| **Bill To:** |
| Contact at company |
| Company name |
| Street address |
| City, ST ZIP |
| Phone number |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Quantity** | **Description** | **Unit price** | **Amou** | **nt** | **Discount applied** |
| 1 | Item Number 1 | $ | 1,00 | $ | 1,00 |  |
| 1 | Item Number 2 | $ | 1,00 | $ | 1,00 |  |
| 1 | Item Number 3 | $ | 1,00 | $ | 1,00 |  |
| 1 | Item Number 4 | $ | 1,00 | $ | 1,00 |  |
|  |  |  | $ | 0,00 |  |
|  |  |  | $ | 0,00 |  |
|  |  |  | $ | 0,00 |  |
|  |  |  | $ | 0,00 |  |
| Subtotal |  |  | $ | 4,00 |  |

Make all checks payable to <Company name.> If you have any questions concerning this invoice, contact <Name> at <Phone number>, <Email>.

|  |
| --- |
| $ 1.000,00 |
| 15% |
| **$ (996,60)** |

**Thank you for your business!**

**Credit itional discount Balance due**

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