

INVOICE

From:

Your Business Name

Address

City, State ZIP

Phone / Email

To:

Client Name

Address

City, State ZIP

Phone / Email

Invoice #:

0001

Date:

MM/DD/YYYY

Description	Quantity	Unit Price	Line Total
<div>Item description</div>	<div>0</div>	<div>\$0.00</div>	<div>\$0.00</div>
<div>Item description</div>	<div>0</div>	<div>\$0.00</div>	<div>\$0.00</div>
<div>Item description</div>	<div>0</div>	<div>\$0.00</div>	<div>\$0.00</div>
Subtotal			<div>\$0.00</div>
Tax			<div>\$0.00</div>
Total			<div>\$0.00</div>

Notes:

Add payment instructions or notes here.