

# INVOICE

## Your Company Name

123 Business Rd.  
City, State ZIP  
Email: info@company.com  
Phone: (123) 456-7890

### Bill To:

Client Name  
Client Company  
456 Client St.  
City, State ZIP

Invoice #: INV-0001

Date: 2024-07-01

Due Date: 2024-07-15

Description	Qty	Unit Price	Amount
Design Services	10	\$60.00	\$600.00
Consultation	5	\$80.00	\$400.00

Subtotal: \$1,000.00  
Tax (10%): \$100.00  
Total: \$1,100.00

### Payment Terms:

- Payment due within **14 days** of invoice date.
- Accepted payment methods: Bank Transfer, Credit Card, PayPal.
- Late payment may incur a **1.5% monthly fee** on unpaid balance.
- Please include the invoice number in your payment reference.

Thank you for your business! For any questions regarding this invoice, please contact us at (123) 456-7890.