

Supplier Invoice

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|--------------------------|-----------------------------------|------------------------|------------------------------------|
| Invoice #: | INV-0001 | Invoice Date: | 2024-06-30 |
| Supplier Name: | ABC Supplies Ltd. | Due Date: | 2024-07-15 |
| Supplier Address: | 123 Main Street, City, Country | PO Number: | PO-4512 |
| Client Name: | XYZ Corporation | Client Address: | 789 Business Ave, City, Country |

| Description | Quantity | Unit Price | Amount |
|-------------------|----------|------------|-----------------|
| Product A | 10 | \$20.00 | \$200.00 |
| Product B | 5 | \$35.00 | \$175.00 |
| Product C | 8 | \$15.00 | \$120.00 |
| Subtotal: | | | \$495.00 |
| Tax (10%): | | | \$49.50 |
| Total: | | | \$544.50 |

Notes: Please make payment within 15 days of the invoice date. For bank details or queries, contact accounting@abcsupplies.com.

Thank you for your business!
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