

Invoice

Vendor: Company Name Ltd. 123 Business Rd. City, State 12345 Email: info@company.com Phone: (555) 123-4567	Bill To: Client Name 456 Client Ave. City, State 67890 Email: client@email.com Phone: (555) 765-4321
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Invoice #: INV-2024-001	Date: 2024-06-10	Due Date: 2024-07-10
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#	Description	Qty	Unit Price	Amount
1	Consulting Services - May 2024	10	\$100.00	\$1,000.00
2	Report Preparation	1	\$250.00	\$250.00
3	Travel Expenses	1	\$150.00	\$150.00
Subtotal				\$1,400.00
Tax (10%)				\$140.00
Total Due				\$1,540.00

Payment Terms:

Payment is due within 30 days from the invoice date.
Late payments are subject to a 2% monthly late fee.
Accepted payment methods: Bank Transfer, Check, Credit Card.
Please include the invoice number with your payment.

For questions, contact us at info@company.com or (555) 123-4567.