

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

Invoice #: INV-2024-001

Date: 2024-06-10

Due Date: 2024-07-10

#	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.