## Your Service company name





Address

City, State ZIP DATE:
Phone INVOICE:

Contact Info.

Bill To: (#) Service Location

Name Name
Address Address
City, ST ZIP City, ST ZIP
Country Country
Phone Contact

P.O.	Sales	Despatch	Method	Terms	Due Date	
DESCRIPTION		PRICE (inc TAX)	QTY	TOTAL (NET)	VAT	TOTAL (VAT)
V		NET TOTAL			-	
Your payment information (baank account etc.)		account etc.)	Delivery Charge			-
			VAT	17.50% <b>TOTAL</b>		-
				PAID		-
				TOTAL DUE		-
				TO THE DOE		-

your web site, email, phone numbers your vat reg#