

Small Business Name
123 Main Street
City, State ZIP
Phone: (123) 456-7890
Email: info@business.com

INVOICE

Invoice #: INV-00123
Date: 2024-06-01
Due Date: 2024-06-15

Bill To:
Client Name
456 Client Road
Town, State ZIP
client@email.com

Ship To:
Client Name
456 Client Road
Town, State ZIP

Description	Quantity	Unit Price	Amount
Product or Service Name	2	\$50.00	\$100.00
Another Item	1	\$200.00	\$200.00
Subtotal			\$300.00
Tax (10%)			\$30.00
Total			\$330.00

Terms & Notes:
Thank you for your business. Payment is due within 14 days.
Please make checks payable to **Small Business Name**.
Thank you for your business!
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