

**Company Name**

Address Line 1

Address Line 2

Phone: (xxx) xxx-xxxx

Email: info@company.com

**SERVICE INVOICE**

**Invoice #:** INV-0001

**Date:** 2024-06-22

**Due Date:** 2024-07-06

**Billed To:**

Client Name

Client Company

Client Address

Client Email

#	DESCRIPTION OF SERVICES	QTY	UNIT PRICE	AMOUNT
1	Service Item 1	2	100.00	200.00
2	Service Item 2	1	150.00	150.00
Subtotal				350.00
Tax (10%)				35.00
Total				385.00

**Notes:** Thank you for your business!

Payment is due within 14 days. Please make payment to the account provided.