

INVOICE TEMPLATE

I. INVOICE DETAILS

Invoice Number: _____

Date: _____

Due Date: _____

II. FROM (SENDER)

Business Name: _____

Contact Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Website: _____

III. BILL TO (CLIENT)

Client Name: _____

Company Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

IV. SHIP TO (IF APPLICABLE)

Name: _____

Address: _____

City, State, ZIP: _____

V. PRODUCTS / SERVICES

Description	Quantity	Unit Price	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VI. TOTALS

Subtotal: _____

Discount (if applicable): _____

Tax Rate (%): _____

Tax Amount: _____

Shipping/Handling: _____

TOTAL DUE: _____

VII. PAYMENT TERMS & INSTRUCTIONS

Payment is due within _____ days.

Please make checks payable to: _____

Payment Methods Accepted:

☐ Cash

☐ Check

☐ Credit Card

☐ Bank Transfer / ACH

☐ Online Payment (PayPal/Venmo/Zelle)

Bank Transfer Details (If Applicable):

Bank Name: _____

Account Name: _____

Account Number: _____

Routing Number: _____

SWIFT/BIC: _____

VIII. NOTES / COMMENTS

Additional Instructions or Notes:

Thank you for your business.