**FROM**

 **YOUR COMPANY NAME**

 123 Your Street

 City, State, Country, ZIP Code

 123-456-7890

 your@email.com

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INVOICE

Invoice Number: 00001

|  |  |
| --- | --- |
| **DATE OF ISSUE** MONTH-DATE-YEAR**BILLED TO** | ­ |
| **Client Name** |
| Street addressCity, State, Country |
| ZIP Code |
| **DESCRIPTION** |  **UNIT COST/HR RATE** |  **QTY/HR** | **AMOUNT** |
| Designer Services | 0.00 | 1 | 0.00 |
| Item name here | 0.00 | 1 | 0.00 |
| Item name here | 0.00 | 1 | 0.00 |
| Item name here | 0.00 | 1 | 0.00 |
| Item name here | 0.00 | 1 | 0.00 |
| Item name here | 0.00 | 1 | 0.00 |
|  |  | **Subtotal** | 0.00 |
|  |  | **Discount** | 0.00 |
|  |  |  **Tax Rate (%)** | 0% |
|  |  |  **Tax amount** | 0.00 |
|  |  | **TOTAL** | **0.00** |

**Terms:** Please pay invoice by MM/DD/YYYY. If this invoice is unpaid by the due date, a non-compounding late fee of 1.2% accrues monthly on the outstanding amount.

***Template courtesy of*** [***TrulySmall***](http://www.trulysmall.com/)