Tax Invoice

[Business Name]
[Business Address 1]
[City], [State] [Postal Code]

[Business Phone Number]
[Business Email Address]

Bill To [Client Name]
[Client Address line 1]
[City], [State] [Postal code]

Invoice Number	2001321
Date	5/19/2017
Terms	
Due Date	
Salesperson	
Ship Via	
Ship Date	

Description	Quantity	Unit price	Amount
Item 1 description	15	Rs. 10	Rs. 150
Item 2 description	10	Rs. 5	Rs. 50
Item 3 description	20	Rs. 5.50	Rs. 110
		Total	Rs. 310

Notes