

INVOICE

Invoice from:

(name)

(address)

(contact information)

VAT Registration No:

Invoice to:

(name)

(address)

(contact information)

VAT Registration No:

Invoice Number: _____

Invoice Date: _____

Payment Terms: _____ Days

Item Description n	Unit price (excluding VAT) (£)	Quantit y	Discount s	Total amount payable (excluding VAT)	VAT rate	Total Price (excl. VAT)

Terms & Conditions (e.g. payment method)
