[ORGANIZER NAME]

INVOICE
[Invoice Number]
Date: [Date]
Due Date: [Date]

EXHIBITOR

[Company Name]
[Address Line 1]
[City, Postcode]
VAT/Tax ID: [Number]

EVENT DETAILS

[Trade Show Name]
Venue: [Location]
Stand Number: [000]
Stand Type: Shell Scheme

Description	Size/Qty	Unit Price	Total
Shell Scheme Stand Space (incl. walls, carpet, fascia)	[00] sqm	[0.00]	[0.00]
Electrical Package (Sockets & Spotlights)	[Qty]	[0.00]	[0.00]
Furniture Package Upgrade	[1]	[0.00]	[0.00]
Mandatory Insurance/Admin Fee	[1]	[0.00]	[0.00]

Subtotal: [0.00]
Tax/VAT: [0.00]

Total: [0.00] [Currency]

Payment Instructions:
Bank: [Name] | IBAN: [Number] | SWIFT: [Code]
Please reference the Invoice Number in your transfer.