INVOICE

[Your Business Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

Invoice #: _____

Date: _____

Due Date: _____

Bill To: [Customer Name]
[Customer Address]
[City, State, Zip]
[Customer Phone]
Ship To: [Recipient Name]
[Shipping Address]
[City, State, Zip]

Description	Quantity	Unit Price	Total

Subtotal: $0.00
Tax (___%): $0.00

Total: $0.00

Notes: [Insert payment instructions or return policy here]

Thank you for your business!