

TAX INVOICE

[Contractor Name / Business Name]

[Address Line 1]

[City, State, Zip]

[Phone / Email]

GST NUMBER [Registration Number]

INVOICE # [00000]

DATE [DD/MM/YYYY]

BILL TO [Client Name]

[Client Business Name]

[Address Line 1]

[City, State, Zip]

PROJECT / REFERENCE [Project Name or PO Number]

Description	Quantity	Unit Price	Total
[Service or Product Description]	0.00	0.00	0.00
[Service or Product Description]	0.00	0.00	0.00

Subtotal: 0.00

GST ([%]): 0.00

Total Amount: 0.00

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account Name: [Name] | Account Number: [00000000] | BSB/Branch: [000-000]

Terms: Please pay within [X] days of invoice date.