

TAX INVOICE

[Contractor Name / Business Name]

[Address Line 1]

[City, State, Zip]

[Email / Phone]

Tax ID / ABN: [Number]

INVOICE #

[00001]

DATE

[Date]

DUE DATE

[Date]

BILL TO:

[Client Name]

[Client Company]

[Address Line 1]

[City, State, Zip]

PROJECT / REFERENCE:

[Project Name or PO Number]

Description	Quantity/Hrs	Rate	Amount
[Service description or task name]	0.00	\$0.00	\$0.00
[Service description or task name]	0.00	\$0.00	\$0.00

Subtotal: \$0.00

Tax ([0] %): \$0.00

Total: \$0.00

Payment Instructions:

Bank: [Bank Name] | Account Name: [Name] | BSB/Routing: [Number] | Account: [Number]

Terms: Please pay within [X] days of invoice date. Thank you for your business.