

TAX INVOICE

[Vendor Name]
[Address Line 1]
[Address Line 2]
Tax ID / VAT No: [Number]

Invoice #: [000000]
Date: [YYYY-MM-DD]
PO Number: [Reference]

BILL TO:

[Client Name]
[Client Address]
[Client Tax ID]

PAYMENT TERMS:

Net [30] Days
Due Date: [YYYY-MM-DD]

Item Description	Qty	Unit Price	Tax %	Amount
[Service or Product Name]	0.00	0.00	0%	0.00
[Service or Product Name]	0.00	0.00	0%	0.00

Subtotal: 0.00
Total Tax: 0.00
Total Amount: [Currency] 0.00

PAYMENT INSTRUCTIONS:

Bank: [Bank Name] | SWIFT/BIC: [Code] | Account: [Number] | IBAN: [Number]
Please include Invoice Number as payment reference.