[Your business name]

[Street address]
[Town, postcode]
[Email]

INVOICE

No. INV-0001

BILL TO

[Customer name]

[Customer address]

ISSUE DATE
10 Sept 2026

DUE DATE
24 Sept 2026

DESCRIPTION	QTY	UNIT PRICE	AMOUNT
MOT tests carried out, class 4	22	£18.00	**£396.00**
Retests	4	£8.00	**£32.00**

Subtotal £428.00

TOTAL DUE £428.00

PAYMENT DETAILS

Bank	**[Bank name]**
Account name	**[Account name]**
Account no.	**[00000000]**
Sort code	**[00-00-00]**

NOTES

Payment due within 7 days of the invoice date.

Created with TapTax