

[Your Business Name]

[Address line 1] · [Town/City] · [Postcode]
[Phone] · [Email] · [VAT/Tax number if registered]

INVOICE

Invoice number [INV-0001]
Date [Date]
Payment due [Date + 14 days]

To: [Customer name]
[Customer address]
[Site address, if different]

Description	Qty	Unit price	Total
Consumer unit replacement (18th Edition)			
First fix wiring, per room			
Second fix: sockets and switches			
EICR condition report			
Install outdoor security lighting			
Subtotal			
VAT at [20]%			
Total			

Terms
Payment is due within 14 days of the invoice date. Bank transfer to: [Account name] | Sort code: [00-00-00] | Account number: [00000000]. Please use the invoice number as the payment reference.