

TAX INVOICE

From: Company Name Address Line 1 Address Line 2 Tax ID: 123456789	To: <input type="text"/> <input type="text"/> <input type="text"/> Tax ID: <input type="text"/>
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Invoice Number: <input type="text"/>	Date: <input type="text"/>	Due Date: <input type="text"/>
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Description	Quantity	Unit Price	Tax (%)	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Subtotal	<input type="text"/>
Tax	<input type="text"/>
Total	<input type="text"/>

Remarks:

Authorized Signature: