

Recurring Invoice

From: <input type="text"/> <input type="text"/>	To: <input type="text"/> <input type="text"/>	Invoice #: <input type="text"/> Date: <input type="text"/> Due Date: <input type="text"/>
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Recurrence Frequency:

Description	Quantity	Unit Price	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"/>

Subtotal:

Tax:

Total:

Notes: