TAX INVOICE

Client's Name (Business name)

|  |
| --- |
| **Business name** |
| **Date** |
| **Invoice No.** |
| **GST No.** |
| **NZBN** |

Address Line 1 (Date)

Address Line 2 (Invoice No.)

City, Post Code (GST No.)

Client's NZBN (NZBN)

|  |  |  |  |
| --- | --- | --- | --- |
| **Description** | **Quantity** | **Unit Price** | **Amount** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **Subtotal** |  |  |
|  | **GST** |  |  |
|  | **Amount Due** |  |  |

Invoice to be paid to account (enter Account Number)

Due date (enter due date)

Company Name Address Line 1

**Notes**

Address Line 2 City, Post Code

Phone Mobile

Email