

## INVOICE

Your full name  
YOUR COMPANY NAME OÜ  
Reg. NUMBER: XXXXXXXX  
VAT: XXXXXXXXXXXX  
Phone  
Email  
Company's address

**Attention:** your customer's name  
Registry number/ID: XXXXXXXXXXXX  
VAT: XXXXXXXXXXXX (if any)  
Address (street address/number)  
Address (city/state/postal code)  
Address (country)  
**Date:** 01/01/2018

**Project Title:** project or product title  
**Project Description:** project or product description  
**Invoice Number:** invoice number (sequential)  
**Terms:** due date or max days for payment

Description	Quantity	Unit Price	Cost
Project or product	1	€ 1	€ 1,00
			€ 0,00
			€ 0,00
			€ 0,00
		Subtotal	€ 1,00
The purchase is liable to Intra-Community supply 0%, Reverse charge.	VAT	0,00 %	€ 0,00
		Total	€ 1,00

Payment: bank transfer to account number (IBAN):

Name of your company OÜ, IBAN: XXXXXXXXXXXXX, Bank's name,  
BIC/SWIFT: XXXXXXXX.

Thanks for your business

Your full name