

[Restaurant Name]

[Restaurant Address 1]

[City], [State] [Postal Code]

[Restaurant Phone Number]

[Restaurant Email Address]

# Invoice

**Bill To** [Client Name ]  
[Client Address line 1]  
[City], [State] [Postal code]

**Invoice Number** 2001321  
**Date** 3/28/2020  
**Due Date**  
**Terms**

Description	Quantity	Unit price	Amount
Beverage	5	Rs. 25	Rs. 125
Chicken	3	Rs. 200	Rs. 600
Salad	5	Rs. 100	Rs. 500
<b>Total</b>			Rs. 1,225

Notes and Terms: