

Το όνομα/λογότυπό σας

INVOICE

Οδός, αριθμός
ΤΚ, Πόλη, Ελλάδα
Τηλέφωνο, Φαξ, Email
VAT Reg. No.: EL123456789

DATE: 21 January 2010
INVOICE # 100
PAYMENT TERMS: NET 45

Bill To:

Όνομα πελάτη
Οδός, αριθμός (όροφος, άλλο)
Πόλη, ΤΚ
Τηλέφωνο, email
VAT Reg. No.:

DESCRIPTION	AMOUNT
En-EI translation of clinical trial protocol (bipolar disorder) 13,600 words x€ 0,14/word Project# 123456, PO# 123456, Date in: 18/01/10, Date out: 21/01/10, PM: Jane Doe	1.904,00
En-EI editing of clinical trial protocol (bipolar disorder) 12 hours x€ 45/hour Project# 123456, PO# 123456, Date in: 18/01/10, Date out: 21/01/10, PM: Jane Doe	540,00
TOTAL EUROS	2.444,00

Please make payment to **Προτιμώμενος τρόπος πληρωμής**
If you have any questions concerning this invoice, please contact **Όνομα, Τηλέφωνο, E-mail 1, E-mail 2**

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