FROM

BILL TO

Customer name or company

Street and number

Postcode and town

Your name or company name

Street and number

Postcode and town

Email address

Phone number

UID / VAT number (optional, e.g. CHE-123.456.789 VAT)

Place and date

Invoice no.

Date / period of service: –

Dear Sir or Madam,
For the services provided, I hereby invoice you for the following amount:

No.	Description	Quantity	Unit price	Total CHF
1				
2				
3				
4				

Subtotal CHF

VAT 8.1% (optional) CHF

Total CHF

Note: No VAT charged (turnover below CHF 100,000).

Payment details

Payable by to the following account:

Payee:

IBAN:

Bank:

Payment reference:

QR-bill (optional): *Insert the payment part of your Swiss QR-bill here.*
Create a ready-made QR-bill in under 60 seconds, free of charge, at magicheidi.ch.

Thank you for your business and for the trust you have placed in me.
Kind regards

Name