

Retail Invoice

Shop Name
[Shop Name]
Address
[Shop Address]
Phone
[Shop Phone]

Invoice No.
[0001]
Date
[YYYY-MM-DD]
Cashier
[Cashier Name]

Customer

Name
[Customer Name]
Contact
[Customer Contact]

#	Item Description	Qty	Unit Price	Discount	Total
1	[Item 1]	[1]	[100.00]	[0.00]	[100.00]
2	[Item 2]	[2]	[50.00]	[5.00]	[95.00]

Subtotal	[195.00]
Total Discount	[5.00]
Tax (e.g. 10%)	[19.00]
Grand Total	[209.00]
Paid	[209.00]
Payment Method	[Cash/Card]

Notes:
[Optional notes or thank you message]

Customer Signature