From: (your name here) Tel: Email:)	Date: Invoice#:	(your refere	nce here)
To (commission	ing producer)			
Description : (se	rvices rendered here)			
Date	Des	Description		Unit Price
		Total		
etails nique Tax Payer	Reference:			
OB:				
Bank details here: lame: lame of bank: Account no: Bort code:				
am responsible fo	or my own National Ins	surance and	Tax contributi	ions
				INVOIC