|  |  |
| --- | --- |
| **請求番号** | 123456789 |
| **請求日** | 2020/1/1 |

〒987-6543

東京都△△区△△町△丁目△△

△△ビルディング

△△株式会社

△△部　山田一郎

TEL:12-3456-7890 FAX:01-2345-6789

 **請 求 書**

〒123-4567

東京都〇〇区〇〇町〇丁目〇〇

〇〇ビルディング〇〇〇〇〇

〇〇株式会社 御中

下記の通りご請求申し上げます。

 単位：円

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **品名** | **数量** | **単位** | **単価** | **金額** |  |  |  |  |
| 1 | 〇〇〇〇〇 | 1 | 個 | 1,000 | 1,000 |  |  |  | 【振込先】△△銀行　△△支店（普）123456789 |
| 2 | 〇〇〇〇〇 | 2 | 個 | 2,000 | 4,000 |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  | **支払期限** | 2020/2/1 |
| 8 |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  | **小計** | 5,000 |
| 10 |  |  |  |  |  |  | **消費税率** | 10% |
| 11 |  |  |  |  |  |  | **消費税** | 500 |
| 12 |  |  |  |  |  |  | **合計(税込)** | **5,500** |

備考