

FACTURE

De:

[Nom]
[Adresse]
[Ville, Code Postal]

À:

.....
Adresse
Code postal

Facture No.

100
Date:
.././..

ID	Description	Qt	Prix (Dh)	Total (Dh)
1	0	0.00	00.00
2	0	0.00	00.00
3	0	0.00	00.00
4	0	0.00	00.00
5	0	0.00	00.00
			Total HT	00.00
			TVA 20%	00.00
			Total TTC	00.00