INVOICE

[Instructor/Business Name]

[Address Line 1]

[Email/Phone]

INVOICE NUMBER
#

DATE OF ISSUE

BILL TO:
[Client Company Name]

[Contact Person]

[Client Address]

PROJECT/TRAINING REFERENCE:
[Course Name / PO Number]

PAYMENT DUE DATE:

Description of Services	Qty/Hrs	Rate	Amount
[Training Session Name/Module]			
[Materials/Preparation Fee]			
[Travel/Expenses if applicable]			

Subtotal $0.00
Tax (if applicable) $0.00
Total Due $0.00

PAYMENT INSTRUCTIONS

Bank Name: [Name]
Account Number: [Number]
Routing/Swift: [Code]

Thank you for your business.