

INVOICE

[Service Provider Name]

[Street Address]

[City, State, Zip]

[Email/Phone]

INVOICE NUMBER #[0000]
DATE [Month DD, YYYY]
DUE DATE [Month DD, YYYY]

BILL TO:

[Client Company Name]

[Contact Name]

[Client Address]

[Client Email]

PROJECT/REF:

[Vulnerability Assessment Q3 / Annual Subscription]

Description of Service	Qty/Hrs	Rate	Amount
External Penetration Testing & Vulnerability Scan	1	\$0.00	\$0.00
Internal Network Asset Discovery & Risk Analysis	1	\$0.00	\$0.00
Remediation Verification & Re-scanning	1	\$0.00	\$0.00

Description of Service	Qty/Hrs	Rate	Amount
Managed Vulnerability Dashboard Access (Monthly)	1	\$0.00	\$0.00

Subtotal: \$0.00

Tax (0%): \$0.00

Total Due: \$0.00

Payment Instructions: [Bank Name] | Account: [Number] | Wire/ACH: [Routing]

Thank you for trusting us with your cybersecurity posture.