

# INVOICE

[Translator/Agency Name]

[Address Line 1]

[City, State, Zip]

[Email/Phone]

**Invoice #:** [000]

**Date:** [MM/DD/YYYY]

**Due Date:** [MM/DD/YYYY]

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## BILL TO:

[Client Name/Company]

[Client Address]

[Contact Email]

## PROJECT DETAILS:

Source Language: [Language]

Target Language: [Language]

Project Ref: [PO Number/Project Name]

Description of Service	Quantity (Words/Hours)	Rate	Amount
Translation: [Document Name]	0	0.00	0.00
Proofreading/Editing	0	0.00	0.00
Formatting / DTP	0	0.00	0.00

Subtotal: 0.00

Tax (%): 0.00

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**TOTAL: \$0.00 [Currency]**

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**Payment Instructions:**

Bank: [Bank Name] | Account: [Number] | SWIFT/IBAN: [Code]

PayPal: [Email Address]

*Thank you for your business.*