

LANGUAGE TRAINING SOLUTIONS

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INVOICE

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

[Client Company Name]
[Department/Attention]
[Street Address]
[City, State, Zip]

TRAINING REFERENCE

Course: [e.g., Business English B2]
Instructor: [Name]
Period: [Month, Year]

Description of Services	Units / Hours	Rate	Amount
Group Language Training Sessions			
One-on-One Executive Coaching			
Course Materials & Assessment Fees			

Subtotal: 0.00
Tax (VAT): 0.00

Total Due: \$ 0.00

PAYMENT INSTRUCTIONS

Bank Name: [Name]
Account Name: [Name]
IBAN / SWIFT: [Numbers]
Reference: [Invoice Number]

Thank you for choosing our corporate language programs.