INVOICE

[Destination Management Company Name]
[Business Address]
[Tax ID / Registration Number]

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

CLIENT / NOMAD INFO

[Client Name]
[Passport/ID Number]
[Email Address]
[Current Location]

DESTINATION DETAILS

Region: [Target Country/City]
Duration: [Start Date] - [End Date]
Service Level: [Basic / Premium / VIP]

Service Description	Qty/Days	Rate	Amount
Visa Processing & Immigration Support	1	[0.00]	[0.00]
Coliving / Long-term Accommodation Setup	1	[0.00]	[0.00]
Coworking Membership / Local Connectivity	[0]	[0.00]	[0.00]

Service Description	Qty/Days	Rate	Amount
Insurance & Compliance Management	1	[0.00]	[0.00]
Logistics & Arrival Concierge	1	[0.00]	[0.00]

Subtotal: [0.00]
Tax/VAT: [0.00]

Total Amount: [0.00] [Currency]

Payment Instructions:
Bank Name: [Name]
SWIFT/BIC: [Code]
IBAN: [Number]
Crypto Wallet: [Address if applicable]

Thank you for choosing [Company Name] for your nomad journey.