

INVOICE

[Immersion Program Name]
[Address Line 1]
[City, Country, Zip]

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

Client Information:

[Client Name / Company]
[Student Name - if different]
[Address Line 1]
[Contact Email]

Trip Details:

Language: [Language]
Location: [City, Country]
Duration: [Start Date] - [End Date]

Description	Rate/Unit	Qty	Total
Language Tuition & Professional Workshops	\$0.00	1	\$0.00
Corporate Accommodation (Half/Full Board)	\$0.00	[Nights]	\$0.00
Cultural Excursions & Networking Events	\$0.00	1	\$0.00

Description	Rate/Unit	Qty	Total
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Airport Transfers & Local Transportation	\$0.00	1	\$0.00
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Subtotal: \$0.00

Taxes/Fees: \$0.00

Grand Total: \$0.00

Payment Instructions: [Bank Name] | **SWIFT/BIC:** [Code] | **IBAN:** [Number]

Terms: Please include the invoice number as a reference for your wire transfer. Late payments may be subject to a 1.5% monthly fee.