

INVOICE

[Consultant Name/Firm]

[Address Line 1]

[Email/Phone]

Invoice #: [0001]

Date: [Month Day, Year]

Billing Period: [Month, Year]

BILL TO

[Client Name]

[Company Name]

[Client Address]

PAYMENT TERMS

Due Date: [Date]

Method: [ACH/Wire/Check]

Description	Hours/Qty	Rate	Amount
Monthly Retainer Fee - [Service Type]	1	\$0.00	\$0.00
Additional Hours (Overages)	[0]	\$0.00	\$0.00

Description	Hours/Qty	Rate	Amount
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Reimbursable Expenses	-	-	\$0.00
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Subtotal \$0.00

Tax (0%) \$0.00

Total Due \$0.00

Notes: Retainer covers up to [X] hours per month. Unused hours do not roll over unless otherwise specified in contract.