

INVOICE

[Consultancy Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

Invoice #: [00000]
Date: [Month Day, Year]
Due Date: [Month Day, Year]

BILLED TO:

[Client Contact Name]
[Client Company Name]
[Client Address]

PROJECT:

[Project Name/Code]

DESCRIPTION OF SERVICES	RATE/BASIS	HOURS/QTY	AMOUNT
[Strategic Analysis / Advisory Phase]	[\$[0.00]]	[0]	[\$[0.00]]
[Management Implementation Support]	[\$[0.00]]	[0]	[\$[0.00]]
[Reimbursable Expenses]	-	-	[\$[0.00]]

Subtotal: \$[0.00]
Tax ([0] %): \$[0.00]

TOTAL DUE: \$[0.00]

Payment Instructions:

Bank: [Bank Name] | Account: [Number] | Routing: [Number]

Thank you for your business.