INVOICE

SEO SERVICES

Invoice #: _____
Date: _____

Provider:

Company Name
Address Line 1
Email / Phone

Bill To:

Client Name
Website URL
Address Line 1

Service Description	Hours/Qty	Rate	Amount
Keyword Research & Strategy			
On-Page Optimization (Meta Tags, Content)			
Technical SEO Audit & Fixes			

Service Description	Hours/Qty	Rate	Amount
Backlink Building & Outreach			
Monthly Analytics & Reporting			

Subtotal: $_____

Tax: $_____

Total Due: $_____

Payment Terms: Due within ___ days.

Notes: Please include invoice number with your payment.