

BILLING STATEMENT

[Your Name / Business Name]

[Street Address]

[City, State, Zip]

[Email / Phone]

Invoice #: _____

Date: _____

Due Date: _____

Bill To:

[Client Name]

[Company Name]

[Street Address]

[City, State, Zip]

Project / Reference:

[Project Name or ID]

Date	Description of Services	Hours	Hourly Rate	Total

Subtotal: \$0.00

Tax/Other: \$0.00

Total Amount Due: \$0.00

Payment Instructions:

Please make checks payable to [Business Name] or pay via [Direct Deposit/Payment Link Details].

Thank you for your business.