

INVOICE

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

Invoice #: [000]
Date: [MM/DD/YYYY]
PO Number: [Reference]

Client:

[Client Name]
[Company Name]
[Address]

Project Details:

Patent Title: [Title]
Patent/App #: [Number]
Source Language: [Language]
Target Language: [Language]

Description	Quantity (Words/Hours)	Rate	Total
Patent Translation (Claims & Specification)			
Technical Proofreading / Legal Review			
Formatting / CAD Drawing Localization			
Subtotal: \$0.00			
Tax: \$0.00			
Total Amount: \$0.00			

Payment Terms: [Net 30 Days]

Wire/ACH Instructions: [Bank Name | Account # | SWIFT/IBAN]

Thank you for your business.