

INVOICE

[Consulting Firm Name]

[Address Line 1]

[Email / Phone]

Invoice #: _____

Date: _____

Due Date: _____

CLIENT:

[Client Name]

[Attention To]

[Client Address]

PROJECT:

[Business Impact Analysis / DR Planning]

DESCRIPTION OF SERVICES	HOURS/QTY	RATE	AMOUNT
Business Continuity Strategy Development			\$0.00
Risk Assessment & Mitigation Planning			\$0.00
Crisis Management Training			\$0.00

Subtotal: \$0.00

Tax (___%): \$0.00

TOTAL DUE: \$0.00

Payment Instructions:

Please make checks payable to [Firm Name].

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

Thank you for your business.