

INVOICE

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

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

Bill To:

[Client Company Name]
[Contact Person]
[Client Address]
[City, State, Zip]

Assignment:

Period: [Start Date] - [End Date]
Role: Interim [Title]

Service Description	Hours/Days	Rate	Amount
Interim HR Management Services	[0.00]	[0.00]	[0.00]
Recruitment & Onboarding Support	[0.00]	[0.00]	[0.00]
Employee Relations Consulting	[0.00]	[0.00]	[0.00]

Subtotal: \$0.00
Tax (if applicable): \$0.00
Total Amount Due: \$0.00

Payment Instructions:

Please make checks payable to [Company Name] or transfer via [Bank Details / IBAN].

Thank you for your business.