INTERIM INVOICE

Invoice #: _____
Date: _____

PROVIDER

[Company Name]
[Address Line 1]
[City, State, Zip]
[Tax ID / Contact]

CLIENT / BILL TO

[Client Name]
[Project Name]
[Address Line 1]
[Contact Email]

MAINTENANCE PERIOD: _____ TO _____

Description of Maintenance Tasks	Hours / Qty	Rate	Amount
Patching & Security Updates			
Bug Fixes & Technical Support			
Database Optimization			
Server / Hosting Oversight			

Subtotal $0.00
Tax (%) $0.00
Amount Due $0.00

PAYMENT INSTRUCTIONS

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

Due Date: Net [Days]

Thank you for your business.