

# INTERIM STATEMENT

**[Your Name/Firm]**  
[Address Line 1]  
[Email/Phone]

**Date:** [Date]  
**Invoice #:** [0000]  
**Period:** [Start] - [End]

BILL TO:

**[Client Name]**  
[Company Name]  
[Address Line 1]

DESCRIPTION OF SERVICES	HOURS/QTY	RATE	AMOUNT
[Service Description - e.g., Tax Planning]	0.00	0.00	0.00
[Service Description - e.g., Ledger Reconciliation]	0.00	0.00	0.00
[Service Description]	0.00	0.00	0.00
Subtotal: 0.00			
Tax ([0] %): 0.00			
<b>Balance Due: 0.00</b>			

Payment Terms: [Net 15/30 Days]

**Payment Info:** [Bank Name] | [Account Number] | [Routing/IBAN]

Thank you for your business.