

INVOICE

FIXED RATE RECURRING

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

BILL TO

[Client Name]
[Client Business Name]
[Client Address]
[Client Email]

INVOICE DETAILS

Invoice #: [000000]
Date: [Date]
Billing Period: [Month, Year]
Due Date: [Date]

Description	Cycle	Amount
Monthly Service Credit Fixed rate retainer for professional services	Monthly	\$0.00
[Additional Recurring Item]	Monthly	\$0.00

Subtotal \$0.00
Tax \$0.00
Total Amount \$0.00

PAYMENT INSTRUCTIONS

This is a recurring monthly invoice. Payment will be automatically processed via the credit card on file on the [Day] of each month. For billing inquiries, contact [Email Address].

Thank you for your business.