MSSP_NAME

INVOICE # [00000]
DATE: [Date]
DUE DATE: [Date]

FROM:

[Your Company Name]
[Address Line 1]
[City, State, Zip]
[Tax ID / VAT Number]

BILL TO:

[Client Company Name]
[Contact Person]
[Client Address]
[Client Email]

Service Description	Qty/Seats	Unit Price	Total
Managed Endpoint Detection & Response (EDR)	0	$0.00	$0.00
24/7 SIEM Monitoring & Log Management	0	$0.00	$0.00
Vulnerability Assessment (Monthly Scan)	0	$0.00	$0.00
Managed Firewall & Intrusion Prevention	0	$0.00	$0.00

Subtotal: $0.00
Tax: $0.00
Total Due: $0.00

Payment Terms: Net 30. Please make checks payable to [Your Company Name].

Note: Services rendered under the Master Service Agreement (MSA) dated [MSA Date].