

INVOICE

Consultancy: [HR Firm Name]
[Address Line 1]
[City, State, Zip]

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

Client:
[Company Name]
[Contact Name]
[Address Line 1]
Project:
[HR Strategy / Organizational Design]

Description of Services	Hours/Qty	Rate	Amount
Strategic Workforce Planning	0.0	\$0.00	\$0.00
Talent Acquisition Strategy	0.0	\$0.00	\$0.00
Organizational Culture Audit	0.0	\$0.00	\$0.00
Subtotal: \$0.00			
Tax (0%): \$0.00			

Total: \$0.00

Payment Terms: Please remit payment via Bank Transfer or Check within 30 days.

Notes: Thank you for choosing [HR Firm Name] for your human capital strategy needs.