INVOICE

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

Invoice #: [00001]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

Bill To:

[Client Company Name]
[Client Contact Name]
[Client Address]
[Client City, State, Zip]

Service Period:

[Start Date] to [End Date]

Service Description	Quantity/Units	Unit Price	Total
Managed IT Services - Tier [X] Subscription	[Qty]	$[0.00]	$[0.00]
Endpoint Security & Antivirus Licensing	[Qty]	$[0.00]	$[0.00]
Cloud Backup & Disaster Recovery (GB)	[Qty]	$[0.00]	$[0.00]
Remote Monitoring & Management (RMM)	[Qty]	$[0.00]	$[0.00]

Service Description	Quantity/Units	Unit Price	Total
Additional On-Site Support (Hours)	[Qty]	$[0.00]	$[0.00]

Subtotal: $[0.00]

Tax: $[0.00]

Balance Due: $[0.00]

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

Notes: [Insert any specific notes regarding service tickets or hardware purchases here.]