ADVISORY INVOICE

[Advisory Firm Name]
[License/CRD Number]

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

BILL TO

[Client Name]
[Client Address]
[Account Number: XXXX-0000]

INVOICE # : [000001]
DATE : [Month DD, YYYY]
BILLING PERIOD : [Q1 202X]

Service Description	Assets Under Mgmt (AUM)	Annual Rate	Amount
Investment Management Fees	$0.00	0.00%	$0.00
Financial Planning Services	-	Fixed	$0.00
Administrative/Custodial Fees	-	-	$0.00

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

Payment Instructions: Fees are typically deducted directly from your managed account(s) unless otherwise specified in your Investment Advisory Agreement.

Disclosures: This invoice is provided for informational purposes. Please compare this statement with the account statements provided by your qualified custodian.