

[CONSULTANCY NAME]

[Address Line 1]
[Address Line 2]
[Email/Phone]

INVOICE

Invoice #: [000]
Date: [MM/DD/YYYY]
Project ID: [Project Name/Code]

CLIENT

[Client Name]
[Contact Person]
[Client Address]

PAYMENT TERMS

Net [30] Days
Due Date: [MM/DD/YYYY]

Strategic Activity / Deliverable	Hours/Qty	Rate	Amount
[Strategic Planning & Phase 1 Discovery]	[0.00]	[\$[0.00]]	[\$[0.00]]
[Project Governance & Risk Assessment]	[0.00]	[\$[0.00]]	[\$[0.00]]
[Stakeholder Management & Reporting]	[0.00]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]
Tax ([0]%): \$[0.00]
Total Balance Due: \$[0.00]

PAYMENT INSTRUCTIONS

Wire Transfer: [Bank Name] | SWIFT: [Code] | Account: [Number]
Please include Invoice # in payment reference.