INVOICE

Invoice #: [0000]

Date: [MM/DD/YYYY]

[Consultancy Name]

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

Client / Stakeholder:

[Contact Name]
[Organization Name]
[Client Address]

Project Reference:

[Project Name/Title]
Engagement Period: [Start Date] - [End Date]

Service / Strategy Phase	Quantity/Hours	Rate	Amount
Stakeholder Mapping & Identification	[0]	[0.00]	[0.00]
Engagement Plan Development	[0]	[0.00]	[0.00]
Workshop Facilitation & Materials	[0]	[0.00]	[0.00]

Service / Strategy Phase	Quantity/Hours	Rate	Amount
Communication Strategy & Toolkits	[0]	[0.00]	[0.00]
Reporting & Impact Assessment	[0]	[0.00]	[0.00]

Subtotal: $[0.00]
Tax ([0]%): $[0.00]

Total Due: $[0.00]

Payment Terms: Due within [30] days of invoice date.

Bank Details: [Bank Name] | **Account:** [00000000] | **SWIFT/BIC:** [XXXX]

Thank you for the opportunity to support your stakeholder engagement initiatives.