

INVOICE

[Consultancy Name]
[Address Line 1]
[Email / Phone]

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

BILL TO

[Client Company Name]
[Contact Name]
[Client Address]

PROJECT REFERENCE

[Project Name/ID]
Contract Ref: [Reference Number]
Phase: [Project Phase]

Description of Deliverables / Milestones	% Complete	Amount
[Milestone 1 Description]	[00]%	0.00
[Milestone 2 Description]	[00]%	0.00
Reimbursable Expenses (Fixed/Itemized)	-	0.00

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

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Number] | Routing: [Number]
Please include Invoice Number with your payment.