

[ADVISOR NAME/FIRM]

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

INVOICE

Invoice #: [00000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO

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

PROJECT REFERENCE

[e.g., Q3 Portfolio Review / Retirement Roadmap]

Description of Consulting Services (Fixed Fee)	Amount
[Service Name - e.g., Comprehensive Financial Plan Development]	\$0.00
[Service Name - e.g., Asset Allocation Strategy & Implementation]	\$0.00

Subtotal: \$0.00
Tax (if applicable): \$0.00
Total Due: \$0.00

PAYMENT INSTRUCTIONS

Please make checks payable to **[Advisor Name]** or pay via wire transfer to:
Bank: [Bank Name] | Account: [Number] | Routing: [Number]

Thank you for your business.