

BUSINESS ADVISOR

[Company Name]
[Street Address]
[City, Country, Postcode]
[Tax ID / VAT Number]

INVOICE

No: [Invoice #]
Date: [DD/MM/YYYY]
Due Date: [DD/MM/YYYY]

BILL TO

[Client Name]
[Client Company]
[Client Address]
[Country]

PROJECT REFERENCE

[Project Name / Contract Ref]
Currency: [USD/EUR/GBP]

Description of Services	Hours/Qty	Rate	Amount
Market Entry Strategy & Analysis	-	-	-
Cross-Border Regulatory Consulting	-	-	-

Description of Services	Hours/Qty	Rate	Amount
International Trade Compliance Oversight	-	-	-
Subtotal: 0.00			
Tax/VAT (%): 0.00			
Total: [Currency] 0.00			

Payment Instructions:

Bank Name: [Name]
SWIFT/BIC: [Code]
IBAN/Account: [Number]
Ref: [Invoice #]

Thank you for your business.