

INVOICE

[Service Provider Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

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

Bill To:

[Client Company Name]
[Attention To]
[Client Address]
[Client Tax ID]

Service Location:

[Site Name/ID]
[Site Address]
[Circuit ID/Reference]

Description of Services	Quantity	Unit Price	Amount
Managed Dedicated Internet Access (DIA) - [Bandwidth]	1	\$0.00	\$0.00
SD-WAN Managed Gateway Subscription	1	\$0.00	\$0.00
Network Security & Firewall Management	1	\$0.00	\$0.00
On-site Hardware Lease (Router/Switch)	[Qty]	\$0.00	\$0.00

Subtotal: \$0.00

Tax/Regulatory Fees: \$0.00

Total Amount: \$0.00

Payment Instructions:

Please include Invoice Number with your payment.

Wire Transfer: [Bank Name] | Account: [Number] | Routing: [Number]

Late fees may apply to overdue balances as per Service Level Agreement (SLA).