

TAX INVOICE

[Agency Name]
[Street Address]
[City, State, Zip]
[Tax ID / ABN]

Invoice #: [00001]
Date: [Date]
Due Date: [Date]

Bill To:

[Client Business Name]
[Contact Name]
[Client Address]
[Client Email]

Project Reference:

Local SEO Services: [Month/Year]
Target Area: [City/Region]

Description of Services	Quantity	Rate	Amount
Google Business Profile Optimization & Management	1	\$0.00	\$0.00
Local Citation Building (NAP Consistency)	1	\$0.00	\$0.00
On-Page SEO & Local Keyword Optimization	1	\$0.00	\$0.00

Description of Services	Quantity	Rate	Amount
Monthly Analytics & Local Ranking Report	1	\$0.00	\$0.00

Subtotal: \$0.00

Tax ([0] %): \$0.00

Total Amount: \$0.00

Payment Instructions:

Bank Name: [Name] | Account Name: [Name] | Account #: [Number] | Sort Code/Swift: [Code]

Please include Invoice # as payment reference.

Thank you for your business.