[Academic Institution Name]

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

INVOICE

Date: [Date]
Invoice #: [000000]
PO #: [000000]

BILL TO:

[Billing Contact Name]
[Organization/University]
[Address]
[Tax ID, if applicable]

SUBSCRIPTION PERIOD:

Start Date: [MM/DD/YYYY]
End Date: [MM/DD/YYYY]
Renewal Term: [Annual/Monthly]

Software Description / License Type	Users/Seats	Unit Price	Amount
[Software Name - Academic License]	[00]	$[0.00]	$[0.00]
[Add-on Modules / Maintenance]	[00]	$[0.00]	$[0.00]
[Academic Discount]	-	-	($[0.00])

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

PAYMENT INSTRUCTIONS:

Bank Name: [Name]
SWIFT/BIC: [Code]
Account Number: [Number]
Reference: [Invoice Number]

Note: This is an academic subscription invoice. Digital delivery of license keys will be processed upon receipt of payment. For inquiries, contact [Support Email].