INVOICE

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

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Company]
[Contact Name]
[Client Address]

SUBSCRIPTION PERIOD:

[Start Date] to [End Date]

Service Description	Qty/Nodes	Unit Price	Total
Managed Firewall & Intrusion Detection	[Qty]	$0.00	$0.00
Endpoint Protection (EDR/MDR)	[Qty]	$0.00	$0.00
SIEM Monitoring & Log Management	[Qty]	$0.00	$0.00

Service Description	Qty/Nodes	Unit Price	Total
Cloud Security Posture Management	[Qty]	$0.00	$0.00

Subtotal: $0.00

Tax: $0.00

Total Due: $0.00

Payment Terms: Net 30. Please make checks payable to [Provider Name].

Notes: Automated security reports for this billing cycle are attached to the client portal.