INVOICE

[Your Company Name]
[Registration Number]
[Email / Phone]

Invoice #: [001]
Date: [YYYY-MM-DD]
Due Date: [YYYY-MM-DD]

CONSULTANT

[Full Name / Business Address]
[City, State, Zip]
[Tax ID]

BILL TO

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

Description of Infrastructure Services	Qty/Hours	Rate/Price	Amount
Cloud Architecture Design & Planning	0.00	$0.00	$0.00
CI/CD Pipeline Optimization	0.00	$0.00	$0.00
Kubernetes Cluster Maintenance	0.00	$0.00	$0.00

Subtotal: $0.00
Tax (0%): $0.00

Total Amount: $0.00

Payment Instructions: [Bank Name] | [Account Number] | [Swift/IBAN]

Notes: Net 30 terms apply. Please include invoice number in payment reference.