

INVOICE

[Translator/Company Name]
[License/Certification Number]

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

BILL TO:
[Client Name/Entity]
[Client Address]
[Tax ID/VAT Number]

INVOICE #: [00000]
DATE: [MM/DD/YYYY]
DUE DATE: [MM/DD/YYYY]

Description of Financial Statement	Source/Target Language	Unit Type (Words/Hours/Pages)	Rate	Amount
Balance Sheet Translation	[Source] to [Target]	[Qty]	[0.00]	[0.00]
Income Statement / P&L	[Source] to [Target]	[Qty]	[0.00]	[0.00]
Cash Flow Statement / Notes	[Source] to [Target]	[Qty]	[0.00]	[0.00]
Formatting / DTP (Financial Tables)	-	[Hours]	[0.00]	[0.00]
Certification/Notarization Fee	-	1	[0.00]	[0.00]

Subtotal: [0.00]
Tax/VAT ([0] %): [0.00]

Total Amount Due: [Currency] [0.00]

PAYMENT INSTRUCTIONS:

Bank Name: [Name] | SWIFT/BIC: [Code] | Account/IBAN: [Number]

Note: Accuracy of financial terminology verified against [IFRS/GAAP] standards.