

INVOICE

[Invoice Number]

[Proofreader Name/Company]

[Email Address]
[Phone Number]
[Website/Address]

Bill To:

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

Date: [MM/DD/YYYY]

Due Date: [MM/DD/YYYY]

| Project Description | Rate (Per Word/Hour) | Quantity | Amount |
|---|----------------------|----------|--------|
| [Project Title/Document Name] - Proofreading Services | \$0.00 | 0 | \$0.00 |
| [Additional Service: e.g., Fact Checking/Formatting] | \$0.00 | 0 | \$0.00 |

Subtotal: \$0.00

Tax (if applicable): \$0.00

Total Due: \$0.00

Payment Instructions:

[Bank Transfer Details / PayPal Email / Check Mailing Address]

Thank you for your business!