

[Your Company Logo]



Invoice Number: ____-____

SOW/MSA: ____/____

Payment Due: [DD/MM/YYYY]_____

Amount Due: \$___.__

_____[Your Company's Full Name]

_____[Company Address]

_____[Relevant Company Phone number]

_____[Relevant Company Email]

Invoice Date: _____[DD/MM/YYYY]

Invoice to:

_____[Full Client Name]

_____[Client Address]

_____[Client Phone Number]

_____[Client Email]

Invoice Period: _____[DD/MM/YYYY – DD/MM/YYYY]

Item Description	Hours/Quantity	Rate	Amount
		\$___.__	\$___.__
		\$___.__	\$___.__
		\$___.__	\$___.__
		\$___.__	\$___.__
		\$___.__	\$___.__
		Credits	(\$___.__)
		Total Due:	\$___.__

Notes/Terms:

Payment can be accepted by the following methods:

1. _____[Payment Option 1]
2. _____[Payment Option 2]
3. _____[Payment Option 3]

Many thanks!

_____[Your Name]

_____[Your Full Company Name]

_____[Your Contact Details]

[Your Company Logo]