

Consulting Fee Invoice

Consulting Firm Name

Address Line 1
Address Line 2
City, State ZIP
Phone: (xxx) xxx-xxxx
Email: info@consultingfirm.com

Invoice #: INV-000123

Date: 2024-06-15

Due Date: 2024-06-30

Billed To:

Client Name
Client Company
Client Address Line 1
Client Address Line 2
City, State ZIP
Email: client@email.com

Description	Date	Hours	Rate	Line Total
Project Planning & Kickoff Meeting	2024-06-01	4	\$200	\$800
Business Process Analysis	2024-06-03	6	\$200	\$1,200
Recommendations Presentation	2024-06-07	3	\$200	\$600
Follow-up Support	2024-06-10	2	\$200	\$400

Subtotal:

\$3,000

Sales Tax (10%):

\$300

Total Due:

\$3,300

Payment Instructions: Please make payment via bank transfer to:

Account Name: Consulting Firm Name

Bank: Your Bank Name

Account Number: 123-456-789

Routing Number: 012345678

Notes: Thank you for your business! Please contact us if you have any questions about this invoice.