

# INVOICE

**From:**  
Consulting Firm Name  
Address Line 1  
City, State ZIP  
Email: email@example.com

**To:**  
Client Name  
Client Company Name  
Address Line 1  
City, State ZIP

**Invoice #:** 0001  
**Date:** 2024-06-13  
**Due:** 2024-06-27

Description	Hours	Rate	Amount
Consulting Service 1	10	\$100	\$1,000
Consulting Service 2	5	\$120	\$600
Project Review	2	\$150	\$300

**Payment Instructions:**  
Bank Name: Sample Bank  
Account No: 123456789  
Routing No: 012345678

Thank you for your business.

Subtotal  
\$1,900

Tax (10%)  
\$190

**Total**  
**\$2,090**