

Your Company Name
Address Line 1
Address Line 2
Phone: (xxx) xxx-xxxx
Email: you@email.com

INVOICE

Invoice #: INV-0001
Date: YYYY-MM-DD
Due Date: YYYY-MM-DD
Service Professional:
[Your Name]

Bill To:
Client Name
Client Company
Client Address
Email: client@email.com

Description of Service	Hours	Rate	Amount
Service Item 1	10	\$50.00	\$500.00
Service Item 2	5	\$60.00	\$300.00

Subtotal	\$800.00
Tax (0%)	\$0.00
Total	\$800.00

Payment Terms: Payment is due within 15 days.
Thank you for your business!