

Project Cost Invoice

Invoice #: 0001

Date: 2024-06-01

Billed To:

Client Name

1234 Main Street

City, Country

Description	Hours	Rate	Cost
Project Planning	10	\$50	\$500
Development	30	\$60	\$1800
Testing	8	\$45	\$360

Subtotal: **\$2660**

Tax (10%): **\$266**

Total: **\$2926**

Payment due within 30 days.

Thank you for your business!