



# Consulting Retainer Invoice

**From:**

[Your Name / Company]  
[Address Line 1]  
[Address Line 2]  
[City, State ZIP]  
[Phone]  
[Email]

**Billed To:**

[Client Name / Company]  
[Client Address Line 1]  
[Client Address Line 2]  
[City, State ZIP]  
[Client Phone]  
[Client Email]

**Invoice #:** [Number]

**Date:** [Date]

**Retainer Period:** [Start Date] – [End Date]

Description	Hours	Rate	Amount
[Consulting Service / Retainer]	[Hours]	[Rate]	[Amount]
Total			[Total Amount]

**Notes:**

[Additional information, terms, or instructions]