

# Invoice

**From:**

[Consultant Name]  
[Consultant Address]  
[City, State ZIP]  
[Email]  
[Phone]

**Bill To:**

[Client Name]  
[Client Address]  
[City, State ZIP]  
[Email]

**Invoice #:** [12345]

**Date:** [YYYY-MM-DD]

**Due Date:** [YYYY-MM-DD]

Description	Hours	Rate	Amount
[Consulting Service A]	[00.0]	[0.00]	[0.00]
[Consulting Service B]	[00.0]	[0.00]	[0.00]

Subtotal  
[0.00]

Tax  
[0.00]

**Total**  
**[0.00]**

**Notes:**

[Payment terms, method, or other important notes.]