



# MILESTONE INVOICE

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## PROVIDER

Company/Name:

Address:

Email/Phone:

Tax ID/VAT:

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## CLIENT

Company/Name:

Address:

Email/Phone:

Project Sponsor:

Project Name:

Invoice Number:

Billing Period / Sprint:

Invoice Date:

Milestone Target:

Due Date:

MILESTONE ID	DELIVERABLES & COMPLETED USER STORIES	HOURS / UNITS	RATE	AMOUNT
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MILESTONE  
ID

DELIVERABLES & COMPLETED USER STORIES

HOURS /  
UNITS

RATE

AMOUNT

Subtotal

Tax / VAT

**Total Due**

**PAYMENT INSTRUCTIONS & TERMS**

Bank Name:

Account Number /  
IBAN:

Swift Code / BIC:

Payment Notes:

PROVIDER AUTHORIZED SIGNATURE

CLIENT SIGN-OFF / MILESTONE ACCEPTANCE