

INVOICE

BILL TO

Invoice No: _____
Date: _____
Due Date: _____
Retainer Period: _____

PAYMENT TERMS

Payment Method: _____
Terms: _____

DESCRIPTION OF SERVICES (FIXED FEE MONTHLY RETAINER)	QTY	AMOUNT
_____ _____ _____	1	_____

Subtotal: _____
Tax / Vat: _____

Total Due: _____

NOTES & PAYMENT INSTRUCTIONS

