



STRATEGIC INVOICE

Invoice No. _____
 Date _____
 Due Date _____
 Advisor Reference _____

CLIENT PROFILE

ENGAGEMENT FRAMEWORK

Strategic Plan Ref _____
 Advisory Period _____
 Payment Terms _____

STRATEGIC ADVISORY SERVICE DESCRIPTION	HOURS / QTY	RATE	TOTAL AMOUNT

SETTLEMENT INSTRUCTIONS

Bank Name: _____
 Account Name: _____
 IBAN/Account No: _____
 SWIFT/BIC: _____
 Reference: _____

Subtotal _____
Tax / Advisory Levy _____
Retainer Credit _____
Total Due _____