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QC INVOICE

Invoice No: _____
Date: _____
Due Date: _____
PO Reference: _____

INVOICE TO

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SERVICE LOCATION / FACTORY

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INSPECTION/AUDIT DATE	REPORT REFERENCE NO.	PRODUCT CATEGORY	LEAD INSPECTOR/AUDITOR

SERVICE DESCRIPTION (AUDIT / INSPECTION TYPE)	MAN-DAYS / QTY	UNIT RATE	TOTAL AMOUNT

Subtotal	
Travel / Expenses	
Tax / VAT	
Total Due	

Payment Terms & Instructions

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PREPARED BY (QC AGENCY)

APPROVED BY (CLIENT SIGN-OFF)