

INVOICE

Invoice No: _____
Date: _____
Due Date: _____
Account No: _____

CLIENT / BILL TO

SERVICE ADDRESS / ATTENTION

DESCRIPTION OF BOOKKEEPING & ACCOUNTING SERVICES	HOURS / QTY	RATE	AMOUNT

Subtotal: _____

Tax / VAT: _____

Total Due: _____

PAYMENT TERMS & PROFESSIONAL NOTES

Thank you for your business!