

INVOICE

Invoice No: _____
Date: _____
Due Date: _____
PO Number: _____

LSP / TRANSLATOR (FROM)

CLIENT (BILL TO)

PROJECT NAME/ ID

SOURCE LANGUAGE(S)

TARGET LANGUAGE(S)

DESCRIPTION OF SERVICE / TASK	LANGUAGE PAIR	QUANTITY (WORDS/HR)	UNIT RATE	AMOUNT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Subtotal: _____
Tax / VAT: _____
Total Due: _____

PAYMENT INSTRUCTIONS

Bank Name:

Account Name:

IBAN:

BIC / SWIFT:

PayPal:

Other Method:

Payment Terms: