

INVOICE

Invoice No:
Date:
Due Date:

CLIENT INFORMATION

Company:
Contact:
Address:
Email/Phone:

PROJECT REFERENCE

Project Name:
Project ID:
Contract Ref:
PM Lead:

Billing Period:
Overall %Complete:

PHASE & DESCRIPTION OF DELIVERABLES	HOURS / QTY	RATE / UNIT PRICE	% COMPLETED	TOTAL DUE
Phase 1: _____				
Phase 2: _____				
Phase 3: _____				
Additional Reimbursables & Expenses				

PHASE & DESCRIPTION OF DELIVERABLES	HOURS / QTY	RATE / UNIT PRICE	% COMPLETED	TOTAL DUE
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Payment Terms & Instructions

Bank Name:

Account No:

Routing No:

Terms:

Thank you for your business.

Subtotal: _____

Tax / VAT: _____

Retainer / Paid: _____

Total Balance Due: _____

PROJECT MANAGER APPROVAL

CLIENT REPRESENTATIVE SIGN-OFF