



# INVOICE

Invoice No: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Due Date: \_\_\_\_\_  
 Project Code: \_\_\_\_\_

## CLIENT / BILLING DETAILS

\_\_\_\_\_  
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 \_\_\_\_\_  
 \_\_\_\_\_

## SPONSOR / DEPARTMENT

\_\_\_\_\_  
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CHANGE MANAGEMENT SERVICE / DELIVERABLE	HOURS / QTY	RATE	TOTAL AMOUNT
<b>Stakeholder Assessment &amp; Change Impact Analysis</b> Identification of key stakeholder groups and mapping of change impacts.			
<b>Change Strategy &amp; Communication Planning</b> Development of leadership alignment roadmap and communication matrix.			
<b>Training Needs Analysis &amp; Curriculum Design</b> Development of training plans and materials for impacted business units.			
<b>Change Coalition &amp; Champion Network Enablement</b> Facilitation and coaching sessions for change champions.			
<b>Adoption Tracking &amp; Readiness Assessments</b> Post-implementation feedback loops, surveys, and readiness check-ins.			

**Subtotal:** \_\_\_\_\_

**Tax / VAT:** \_\_\_\_\_

**Total Due:** \_\_\_\_\_

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**Payment Terms & Milestone Notes**

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