

INVOICE



Invoice No: _____

Date: _____

Due Date: _____

FROM (SERVICE PROVIDER)

TO (CLIENT)

Project Name:

Project
Manager:

Contract
Ref:

PO Number:

MILESTONE ID	MILESTONE DESCRIPTION	COMPLETION DATE	AMOUNT

Subtotal: _____

Tax / VAT: _____

Total Due: _____

PAYMENT TERMS & INSTRUCTIONS

AUTHORIZED SIGNATURE

Date