



INVOICE

Invoice No: _____

Date: _____

Due Date: _____

P.O. Number: _____

BILL TO

CLIENT & PROJECT DETAILS

Client Ref: _____

Department: _____

Hiring Mgr: _____

CANDIDATE NAME	POSITION / TITLE	ANNUAL SALARY	FEE %	AMOUNT DUE

Subtotal _____

Tax Rate / VAT % _____

Tax / VAT Amount _____

Total Due _____

PAYMENT INSTRUCTIONS

Bank Name: _____

Account Name:

Account No / IBAN:

Sort Code / BIC:
