## **CONSULTANT INVOICE TEMPLATE**



## **CONSULTANT INVOICE**

OTHER GRAND TOTAL

LESS PAYMENT

TOTAL DUE

enter initial payment amount

			INVOICE DATE	WORK ORDER NO.	INVOICE NO.
CONSULTANT					
COMPANY NAME		HOURLY SERVICES	HOURS	RATE	TOTAL
CONTACT NAME					
ADDRESS					
ADDRESS					
ADDRESS					
TELEPHONE					
EMAIL					
CLIENT					
COMPANY NAME			TOTAL HOURS		TOTAL
CONTACT NAME					
ADDRESS					
ADDRESS		flat rate Services + Additional Charges			TOTAL
ADDRESS					
TELEPHONE					
EMAIL					
TERMS					
		Remarks / Instructions:			TOTAL
Please make check payable to				SUBTOTAL	
			enter percentage	TAX RATE	
For questions concerning this invoice, please contact				TOTAL TAX	

THANK YOU

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