

EDUCATIONAL CONSULTANT INVOICE

DETAILS

DATE: _____

INVOICE NO. _____

FROM	BILL TO
COMPANY: _____	COMPANY: _____
ATTN: _____	ATTN: _____
ADDRESS: _____	ADDRESS: _____
CITY, STATE: _____	CITY, STATE: _____
ZIP: _____	ZIP: _____
PHONE: _____	PHONE: _____
E-MAIL: _____	E-MAIL: _____

DESCRIPTION	AMOUNT (\$)								
NOTES: _____ _____ _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #4a7ebb; color: white;"> <td style="padding: 5px;">SUBTOTAL</td> <td style="width: 50px;"></td> </tr> <tr> <td style="padding: 5px;">DISCOUNT</td> <td></td> </tr> <tr> <td style="padding: 5px;">TAX / VAT</td> <td></td> </tr> <tr style="background-color: #4a7ebb; color: white;"> <td style="padding: 5px;">TOTAL</td> <td></td> </tr> </table>	SUBTOTAL		DISCOUNT		TAX / VAT		TOTAL	
SUBTOTAL									
DISCOUNT									
TAX / VAT									
TOTAL									

THANK YOU FOR YOUR BUSINESS

