

# FINANCIAL ADVISOR INVOICE

## DETAILS

INVOICE NO. \_\_\_\_\_

DATE: \_\_\_\_\_

TERMS: \_\_\_\_\_

## FROM

COMPANY: \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

## BILL TO

COMPANY: \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

DESCRIPTION	HOURS	RATE (\$/HR)	AMOUNT (\$)
NOTES: _____		<b>SUBTOTAL</b>	
_____		<b>DISCOUNT</b>	
_____		<b>TAX / VAT</b>	
_____		<b>TOTAL</b>	

THANK YOU FOR YOUR BUSINESS

