**Your Company Name** ( i.e. Acme Business Services)

**Your Company Street Address** (250 Main Street, Suite 400)

**Your Company City, State & Zip** (Los Angeles, CA 90009)

**Date Invoice Is Sent** (Date: January 12, 2015)

**Invoice Number** (Invoice Number: 216)

**Broad Description Of Work** (New Website Design Work Completed In January For Jellyfish Industries)

**Client Name** (Client: Jellyfish Industries)

**Client Street Address** (300 Washington Street)

**Client City, State & Zip** (Los Angeles, CA 90009)

**Client Billing Contact** (Billing Contact: Joe Smith)

**Billing Contact Phone Number** (Billing Contact Phone #: 888-444-4444 ext 444)

**Billing Contact Email** (Billing Contact Email: [joesmith@jellyfishindustries.com](mailto:joesmith@jellyfishindustries.com))

**Client Business Contact** (Business Contact: Mari Clinton)

**Business Contact Phone Number** (Business Contact Phone #: 888-444-4444 ext 888)

**Business Contact Email** (Business Contact Email: Mariclinton@jellyfishindustries.com)

**Detailed Description Of Work, Including Authorization & Milestones** (Description: As per our contract signed on December 15, 2014, we continue to work on the new website Jellyfish industries. This month we delivered a revised wireframe for the website and suggested changes to the company logo.

**Summary -** *(How This Table Can Be Modified For Different Industries Is Discussed Below)*

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Quantity | Cost Per Unit | Total Cost |
| Senior Designer Work On Wireframe | 30 Hours | $60.00 | $1,800.00 |
| Senior Designer Work On Logo | 15 Hours | $60.00 | $900.00 |
| Travel Expenses For Meeting On January 13th |  |  | $200.00 |

**Subtotal** (Subtotal: $2,900.00)

**Discounts If Applicable** (Discount: -$290.00)

**Taxes If Applicable** (Taxes: $0.00)

**Total Amount Due** (Total Amount Due: $2610.00)

**Payment Due** (Payment Due On February 12, 2015)

Payment Instructions:

Please pay by ach transfer to the following account:

Please send electronic payment to following:

**Business Name** (Acme Business Services)

**Bank Name** (Bank Of America)

**ACH Routing Number (**ACH R/T 022222222)

**Business Bank Account Numbe**r (Account # 444888888888)

Or by check:

**Your Company Name** ( i.e. Acme Business Services)

**Attention** (Attention: Account Receivable)

**Your Company Street Address** (250 Main Street, Suite 400)

**Your Company City, State & Zip** (Los Angeles, CA 90009)

**Contact Person For Billing Questions** (If you have any questions regarding this invoice, please contact David Walter at 555-555-5555 or by email at davidwalter@acmebusinessservices.com )

**Your Company Name** ( i.e. Acme Business Services)

**Your Company Street Address** (250 Main Street, Suite 400)

**Your Company City, State & Zip** (Los Angeles, CA 90009)

**Date Invoice Sent** (Date: January 12, 2015)