

Your Company Name

123 Main St.
Suite 100
City, State ZIP
Phone: (123) 456-7890
Email: info@company.com

INVOICE

Invoice #: 00123
Date: 2024-06-14
Due Date: 2024-06-30

Billed To:

Client Name
456 Client Address
City, State ZIP

Description of Services	Hours	Rate	Amount
Consulting Service	10	\$80.00	\$800.00
Design Work	5	\$60.00	\$300.00
Total			\$1,100.00

Payment Terms:

Payment is due within 15 days of the invoice date.
Please make payment to the company account listed above.
Thank you for your business!

This **simple service invoice template** sample PDF provides a clean and professional format for billing clients. It is designed to clearly outline services rendered, payment terms, and due dates. This template ensures efficient and organized invoicing for service providers.