

# Service Provider

**Company Name**  
123 Main Street  
Hometown, State ZIP  
Phone: (123) 456-7890  
Email: info@company.com

# Client

**Client Name**  
456 Client Avenue  
Client City, State ZIP  
Phone: (321) 654-0987  
Email: client@email.com

# SERVICE INVOICE

**Invoice #:** SI-2024-011

**Issue Date:** 2024-06-10

**Due Date:** 2024-06-24

## Payment Terms

Net 14 Days

Bank Name: ABC Bank

Account Number: 0001234567

IBAN: AB1234567890

## Service Details

Description	Quantity	Unit Price	Amount
Website Design & Development	1	\$1,200.00	\$1,200.00
SEO Optimization (Monthly)	1	\$300.00	\$300.00
Consultation Hours	5	\$80.00	\$400.00
<b>Subtotal</b>			<b>\$1,900.00</b>
<b>Tax (5%)</b>			<b>\$95.00</b>
<b>Total</b>			<b>\$1,995.00</b>

## Notes

Thank you for your business. Please make the payment by the due date above to avoid late fees.

## Important Notes about Service Invoices

- Provide clear and accurate service descriptions and pricing.
- Always state the invoice date and payment due date.
- Include both service provider and client contact details.
- Specify payment terms and bank details for easy transactions.
- Keep a copy of every issued invoice for your records.