

From: [Your Name/Business Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

To: [Client Name/Company Name]
[Client Address]
[City, State, Zip Code]
[Attention: Accounts Payable]

Invoice Number: [001]
Date: [Current Date]
Billing Period: [Month, Year]

Monthly Placement Services Invoice

Candidate Name	Position Filled	Start Date	Annual Salary	Fee (%)	Amount
[Candidate 1 Name]	[Job Title]	[MM/DD/YYYY]	[\$[00,000.00]]	[00]%	[\$[0,000.00]]
[Candidate 2 Name]	[Job Title]	[MM/DD/YYYY]	[\$[00,000.00]]	[00]%	[\$[0,000.00]]
Total Amount Due:					[\$[0,000.00]]

Payment Terms: [e.g., Net 15 / Due on Receipt]

Payment Instructions:

Bank Name: [Name]
Account Name: [Name]
Account Number: [Number]
Routing/Swift Code: [Code]

Thank you for your business.

Sincerely,
[Your Signature]