**Invoice Number:** [yyyymmCNoINo]

**Date of Invoice:** 28.07.2017

**Due Date:** 28.08.2017

**TO:**[Company Name]  
[Billing Address]

Email: [xxx]

Dear customer,

This invoice is based upon our services provided during the time period of July 2017.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Days** | **Rate per Day** | **Amount** | |
|  |  |  |  |  |
| 1. Risk Model Audit | 9 | £xxx | £xxx.xx |  |
| 2. Stress Testing  Lorem ipsum dolor sit amet, consectetur adipisicing elit, se | 7 | £xxx | £xxx.xx |  |
| 3. Project Management | 1 | £xxx | £xxx.xx |  |
| 4. Advisory | 3 | £xxx | £xxx.xx |  |
|  |  |  |  |  |
|  |  | SUBTOTAL: | £xxxx.xx |  |
|  |  | VAT: | - |  |
|  |  | **TOTAL:** | **£xxxx.xx** |  |
|  |  |  |  |  |

Please make payments to AURISCON LLP within 25 days of receipt of this invoice, using the bank details provided.

Notice: this invoice is subject to reverse-charge VAT.

Thank you for your business.

With best regards