

Urgent Translation Services

Invoice

Invoice #: <input type="text"/>	Billed To: <input type="text"/> <input type="text"/> <input type="text"/>
Date: <input type="text"/>	

Description	Language Pair	Quantity (Words)	Rate	Amount
<input type="text"/>				
<input type="text"/>				
Total				<input type="text"/>

Payment Terms:

<input type="text"/>

Notes:

<input type="text"/>

Thank you for choosing Urgent Translation Services!