

Medical Translation Invoice

From:

Medical Translation Services
123 Health Ave, Suite 456
Metro City, State, 12345
Email: contact@medtrans.com

To:

Invoice #:

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Date:

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Description	Source Language	Target Language	Words	Rate (per word)	Amount
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

Subtotal:

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Tax (%):

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Total:

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Payment Terms:

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Authorized Signature:

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Thank you for choosing Medical Translation Services!