

[Your Company Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Date]

[Client Name]
[Client Company Name]
[Client Address]
[City, State, Zip Code]

Dear [Client Name],

Thank you for choosing [Your Company Name]. We look forward to our professional collaboration. This letter serves to outline our invoicing procedures and payment terms to ensure a smooth financial relationship.

Invoicing Schedule:

Invoices will be issued on [e.g., the 1st of every month / completion of milestones / weekly basis]. All invoices will be sent via email to [Client Email Address].

Payment Terms:

Payment is due within [e.g., 15/30] days from the date of the invoice (Net [30]).

Accepted Payment Methods:

We accept payments via the following methods:

- Bank Transfer (ACH/Wire)
- Credit Card via [Payment Portal Link]
- Check (Payable to [Your Company Name])

Late Payments:

Invoices not paid within the specified timeframe may be subject to a late fee of [e.g., 1.5%] per month on the outstanding balance.

If you have any questions regarding these terms or specific billing inquiries, please contact our billing department at [Billing Email/Phone].

Sincerely,

[Your Name]
[Your Title]