

INVOICING CHECKLIST

Build A Payment Structure To Fit Your Customer's Needs

Use this list as a guide to collect information from your customer and set up their invoice perfectly from day one of your contract:

Phone Number:	
City/State/Zip:	
Address:	
Attention:	
Company:	
WHERE SHOULD THE INVOICES BE SENT?	?
How often is new P.O. generated?	
□ No	
Yes	
Is this required on each Invoice?	
IS A P.O. REQUIRED?	
Notes:	
Due Date:	
Do they require board meetings or additional	al approval processes in order to pay the invoice?
WHAT IS AN APPROPRIATE DUE DATE?	
Annually	
Quarterly	
Monthly	
WHAT DOES YOUR CUSTOMER'S METER CYCLE LOOK LIKE?	
Annually	
Quarterly	
Monthly	

