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2019 – Version 2.3

|  |  |  |
| --- | --- | --- |
| Organisational unit (OU)  Address | Invoice date: Invoice no.: Order number: Commitment no.: Cost centre:  Reference number:  REF contact person OU:  Social insurance no.: |  |

**Invoice / Expense Account**

Period of service: MM/YY

Canton / country:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Item /  date*** | ***Description*** | ***Fee*** | ***Per unit*** | | ***Units*** | ***Total CHF*** |
| *1* | *Description of  service* | *Fee* | *hour/day/lump sum* | | *Quantity* | *Quantity x fee* |
| *2* |  |  | |  |  |  |
| *3* |  |  | |  |  |  |
| *4* |  |  | |  |  |  |
| *Total fee in CHF* | | | | | |  |
| *Total expenses in CHF* | | | | | |  |
| ***Total invoiced amount in CHF*** | | | | | |  |

Thank you for your order.

Yours sincerely

Sandra Sample

|  |  |
| --- | --- |
| **Payment details** | |
| Bank |  |
| Account holder name |  |
| Account number |  |
| IBAN |  |