

Customer Billing Statement

Business/Company Name

Address: [Street Address, City, State, Zip Code]

Phone: [Phone Number] | Email: [Email Address] | Website: [Website URL]

Billing Statement No: [Unique Statement Number]

Date of Issue: [MM/DD/YYYY]

Due Date: [MM/DD/YYYY]

1. Customer Information

Customer Name: [Customer Full Name]

Customer ID: [Unique Customer ID]

Address: [Customer Address]

Phone: [Customer Phone Number]

Email: [Customer Email]

2. Statement Summary

Description	Invoice Number	Invoice Date	Due Date	Amount	Payments	Balance Due
[Description of Service/Product]	[INV-001]	[MM/DD/YYYY]	[MM/DD/YYYY]	[\$Amount]	[\$Payment]	[\$Balance]

[Description of Service/Product]	[INV-0 02]	[MM/DD/YYYY]	[MM/DD/YYYY]	[\$Amount]	[\$Payment]	[\$Balance]
Total				[\$Total]	[\$Total]	[\$Total]

3. Payment Details

Total Amount Due: [\$Total Amount Due]

Payment Due Date: [MM/DD/YYYY]

Payment Methods:

- Bank Transfer: [Bank Name, Account Number, SWIFT/BIC]
- Online Payment Link: [Payment URL]
- Other Payment Methods: [Specify if applicable]

4. Terms and Conditions

1. Payments must be received by the due date to avoid any late fees.
2. Any unpaid balance after [X days] will incur a late fee of [X%] per month.
3. If you have questions regarding this billing statement, please contact us at [Phone Number] or [Email Address].

5. Notes and Remarks

- [Any special instructions or comments, e.g., "Thank you for your business!" or "Please reference your statement number when making a payment."]

6. Footer (Optional)

Business/Company Name | Address: [Street Address] | Phone: [Phone Number] |
Email: [Email Address]

