

INTERIOR DESIGN STUDIO

123 Design Avenue
New York, NY 10001
hello@designstudio.com

INVOICE

#INV-001
Date: [Date]
Due Date: [Date]

CLIENT

[Client Name]
[Street Address]
[City, State, Zip]

PROJECT

[Project Name/Phase]
Contract ID: [ID Number]

DESCRIPTION	RATE/PRICE	QTY/HRS	AMOUNT
Design Consultation & Concept Development	\$0.00	0	\$0.00
Furniture & Fixture Procurement	\$0.00	0	\$0.00

DESCRIPTION	RATE/PRICE	QTY/HRS	AMOUNT
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3D Rendering & Floor Plans	\$0.00	0	\$0.00
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Site Supervision & Installation	\$0.00	0	\$0.00
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Subtotal \$0.00
Tax (0%) \$0.00
Total Due \$0.00

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Number] | Wire: [Code]
Please include invoice number in payment reference.

Thank you for your business.