

PODCAST NAME / STUDIO INVOICE

FROM

[Entity Name / Producer]
[Mailing Address]
[Email / Phone]
BILL TO

[Brand/Agency Name]
[Contact Person]
[Billing Address]

DETAILS

Invoice #: [0000]
Date: [Date]

PAYMENT TERMS

Due Date: [Date]
PO #: [Number]

PLACEMENT / EPISODE	TYPE (PRE/MID/POST)	UNITS	RATE	AMOUNT
[Episode Title/Number]	[Ad Type]	[Qty]	[\$[0.00]]	[\$[0.00]]
[Episode Title/Number]	[Ad Type]	[Qty]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]

Discount/Agency Fee: -[\$[0.00]]

Total Balance Due: \$[0.00] [Currency]

PAYMENT INSTRUCTIONS

Bank: [Name] | Account: [Number] | Routing: [Number] | SWIFT: [Code]

Please include Invoice # in payment reference.