

INVOICE

[Studio Name]
[Address Line 1]
[Email / Phone]

Invoice #: [000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO

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

SERVICE DESCRIPTION	HOURS	RATE	AMOUNT
[Service Name: e.g., Initial Concept & Space Planning]	0.00	\$0.00	\$0.00
[Service Name: e.g., Sourcing & Specifications]	0.00	\$0.00	\$0.00
[Service Name: e.g., Project Management / Site Visits]	0.00	\$0.00	\$0.00
Subtotal		\$0.00	\$0.00
Tax (0%)		\$0.00	\$0.00
Total Due		\$0.00	\$0.00

PAYMENT INSTRUCTIONS

Please make checks payable to **[Studio Name]** or pay via [Payment Link/Bank Details].
Thank you for your business.