

INVOICE

[Architectural Firm Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

Invoice #: [0000]
Date: [Date]
Project ID: [Project #]

CLIENT / BILL TO

[Client Name]
[Company Name]
[Client Address]
[Phone/Email]

PROJECT DETAILS

[Project Name]
[Property Address/Site Location]
[Phase: e.g., Schematic Design / Construction Docs]

DESCRIPTION OF DRAFTING SERVICES	HOURS/QTY	RATE	AMOUNT
[Service Name: e.g., Floor Plans, 3D Rendering, Site Analysis]	[0.00]	[\$[0.00]]	[\$[0.00]]
[Additional Service or Revision Phase]	[0.00]	[\$[0.00]]	[\$[0.00]]

DESCRIPTION OF DRAFTING SERVICES	HOURS/QTY	RATE	AMOUNT
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[Reimbursable Expenses: e.g., Large Format Printing]	[0.00]	[\$0.00]	[\$0.00]
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Subtotal: \$[0.00]
 Tax ([0] %): \$[0.00]
 Total Due: \$[0.00]

Payment Terms: Net [30] Days. Please make checks payable to **[Firm Name]**.

Wire Transfer / IBAN: [Bank Details Here]

Thank you for your business.