

INVOICE

[Your Name / Studio Name]

INVOICE NUMBER

#0000

DATE

[MM/DD/YYYY]

BILL TO

[Client Name]
[Company Name]
[Client Address]
[Client Email]

FROM

[Your Address]
[Your Phone]
[Your Email]
[Website]

Project / Service Description	Rate Type	Qty/Hours	Unit Price	Total
[Project Name / Copy Asset Type]	[Flat/Hourly]	0	\$0.00	\$0.00
[Revisions/Consultation]	[Hourly]	0	\$0.00	\$0.00

Subtotal \$0.00
Tax (0%) \$0.00
Amount Due \$0.00

PAYMENT INSTRUCTIONS

Payment due within [X] days. Please make checks payable to [Your Name] or pay via [Direct Deposit Info/Link].

Thank you for your business!