

INVOICE

[Your Name/Production Company]

[Street Address]

[City, State, Zip]

[Email/Phone]

Invoice #: [000]

Date: [Date]

Due Date: [Date]

BILL TO:

[Client Name/Studio]

[Contact Person]

[Address]

[City, State, Zip]

PROJECT:

[Project Title]

[Draft/Phase, e.g., Second Polish]

[Production Code, if applicable]

DESCRIPTION OF SERVICES

QUANTITY/RATE AMOUNT

[Item: e.g., Feature Screenplay - First Draft Delivery]	[1]	\$0.00
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[Item: e.g., Story Consultation/Revision Hours]	[0] hrs @ \$[0]/hr	\$0.00
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DESCRIPTION OF SERVICES**QUANTITY/RATE AMOUNT**

[Item: e.g., Research Expenses]	[Flat Fee]	\$0.00
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Subtotal: \$0.00

Tax/WGA Pension: \$0.00

TOTAL DUE: \$0.00

PAYMENT TERMS:

Please make all checks payable to **[Name]**.

Wire transfer details: [Bank Name] | [Account #] | [Routing #]

Terms: Net [30] days. Late payments may be subject to a [0]% fee.

Thank you for the opportunity to collaborate on this project.