

INVOICE

PR Campaign Services

Invoice #: [0000]

Date: [Date]

Due Date: [Date]

From:

[PR Agency Name]

[Address Line 1]

[Email/Phone]

Bill To:

[Client Name]

[Company Name]

[Address Line 1]

DESCRIPTION OF SERVICES	RATE/UNIT	QTY/HOURS	TOTAL
Media Relations & Outreach	\$0.00	0	\$0.00
Press Release Writing & Distribution	\$0.00	0	\$0.00
Content Creation & Copywriting	\$0.00	0	\$0.00
Social Media Management	\$0.00	0	\$0.00

DESCRIPTION OF SERVICES	RATE/UNIT	QTY/HOURS	TOTAL
Crisis Management / Consultation	\$0.00	0	\$0.00

Subtotal: \$0.00

Tax: \$0.00

Grand Total: \$0.00

Payment Instructions: [Bank Name / Account Details / Wire Info]

Terms: Please make payment within [30] days. Late payments may be subject to a [0%] fee.