

# INVOICE

[Your Agency Name]  
[Address Line 1]  
[Email/Phone]

**Invoice #:** [0001]  
**Date:** [MM/DD/YYYY]  
**Billing Period:** [Month, Year]

## BILL TO

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

## PAYMENT TERMS

Due Date: [MM/DD/YYYY]  
Payment Method: [Transfer/Card/PayPal]

Service Description	Platform	Ad Spend	Rate/Fee	Total
PPC Campaign Management	Google Ads	[\$0.00]	[Flat Fee / %]	[\$0.00]
Social Ads Management	Meta Ads	[\$0.00]	[Flat Fee / %]	[\$0.00]
Reporting & Analytics	-	-	[\$0.00]	[\$0.00]

Subtotal: [\$0.00]

Tax ([0] %): \$[0.00]

**Total Due: \$[0.00]**

---

**Notes:** Management fees are separate from direct ad spend paid to platforms. Please include invoice number in payment reference.