

INVOICE

[Your Name/Agency Name]

Invoice #: [000]
Date: [Month Day, Year]

BILLED TO

[Client Company Name]
[Client Address Line 1]
[Client Address Line 2]

PAYMENT TERMS

Monthly Retainer (Advance)
Due Date: [Date]

Description	Period	Amount
Fractional CMO Services Strategic leadership, marketing roadmap, and team oversight.	[Month, Year]	\$0.00
Technology / Software Pass-through Platform subscriptions and marketing tools.	[Month, Year]	\$0.00
		Subtotal: \$0.00
		Total Due: \$0.00

PAYMENT INSTRUCTIONS

Bank Transfer: [Bank Name] | Account: [Number] | Routing: [Number]
Check Payable to: [Your Entity Name]

Thank you for your partnership.