INVOICE

Invoice #: [000]

Date: [MM/DD/YYYY]

[Studio Name]

[Business Address]
[Phone Number]
[Email/Website]

CLIENT:

[Client Names]
[Client Address]
[Client Email]

EVENT DETAILS:

Date: [Wedding Date]
Venue: [Venue Name]
Location: [City, State]

Description	Quantity	Rate	Amount
Full Day Coverage Up to 10 hours of continuous coverage	1	$0.00	$0.00
Second Photographer Full day assistance and alternate angles	1	$0.00	$0.00

Description	Quantity	Rate	Amount
Post-Processing & Editing High-resolution digital gallery	1	$0.00	$0.00
Travel/Expenses Round trip to venue locations	-	$0.00	$0.00

Subtotal: $0.00
Tax: $0.00
Total Due: $0.00

Payment Terms: [Net 30 / Due on Receipt]

Notes: [Insert deposit details, bank transfer info, or check mailing address here.]

Thank you for letting me capture your special day!