

STUDIO BOX CO.

INVOICE #0000
DATE: 00/00/0000

BILL TO

[Customer Name]
[Street Address]
[City, State, Zip]
[Email Address]

SUBSCRIPTION DETAILS

Plan: [Box Type Name]
Frequency: [Monthly/Quarterly]
Status: [Paid/Pending]

DESCRIPTION	QUANTITY	PRICE	TOTAL
[Current Month] Art Supply Box Subscription	1	\$0.00	\$0.00
[Additional Item/Add-on]	0	\$0.00	\$0.00

Subtotal \$0.00
Shipping \$0.00
Tax \$0.00
Total \$0.00

Thank you for supporting the arts. Your supplies are on the way.

www.studioboxco.com | support@studioboxco.com