

[INTERIOR DESIGN FIRM NAME]

[ADDRESS LINE 1] | [CITY, STATE, ZIP]

INVOICE

Date: [MM/DD/YYYY]

Invoice #: [00000]

CLIENT / BILL TO

[Corporate Client Name]

[Contact Name / Department]

[Client Address]

[City, State, Zip]

PROJECT INFORMATION

Project: [Corporate Office Expansion/Renovation]

Location: [Project Address/Site]

Project ID: [PRJ-000]

PHASE / DESCRIPTION	QTY/HRS	RATE	AMOUNT
Schematic Design Space planning and conceptual development.	-	-	\$0.00
Design Development Material selection, finishes, and 3D renderings.	-	-	\$0.00
Construction Documentation Detailed drawings and technical specifications.	-	-	\$0.00

PHASE / DESCRIPTION	QTY/HRS	RATE	AMOUNT
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Furniture, Fixtures & Equipment (FF&E) Procurement and specification management.	-	-	\$0.00
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Subtotal: \$0.00
Tax/VAT ([0]%) : \$0.00
Total Due: \$0.00

Payment Terms: Net 30 days. Please make checks payable to **[Firm Name]**.

Wire Transfer Details: Bank: [Name] | Account: [Number] | Routing: [Number]

Thank you for your business.