[STUDIO NAME]
INTERIOR DESIGN SERVICES

INVOICE NO: #000-00
DATE: [Date]
DUE DATE: [Date]

CLIENT

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

PROJECT REFERENCE

[Project Title/Phase]
[Project Address/Site]
[Contract Number]

SERVICE DESCRIPTION	RATE/FEE	HOURS/QTY	AMOUNT
Design Consultation & Concept Development	$0.00	0	$0.00
Technical Drawings & Floor Plans	$0.00	0	$0.00
FF&E Selection (Furniture, Fixtures, Equipment)	$0.00	0	$0.00
Project Management & Site Supervision	$0.00	0	$0.00

Subtotal: $0.00
Tax ([0]%): $0.00
Total Due: $0.00

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Number] | Routing: [Number]
Please include Invoice Number as reference. Thank you for your business.