

INVOICE

Agency Name
Address Line 1
City, State, Zip
Email@example.com

Invoice #: [0000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO:

Client Company Name
Contact Person
Address Line 1
City, State, Zip

CAMPAIGN PERIOD:

[Start Date] - [End Date]

Platform & Description	Metric (Impressions/Clicks)	Rate/CPM	Total
Facebook Ads Management - Brand Awareness	-	-	\$0.00
Instagram Sponsored Posts - Conversions	-	-	\$0.00

Platform & Description	Metric (Impressions/Clicks)	Rate/CPM	Total
LinkedIn Sponsored Content	-	-	\$0.00
Creative Design & Copywriting Fees	-	-	\$0.00
Subtotal: \$0.00			
Tax (0%): \$0.00			
<hr/> Total: \$0.00			

Notes:

Please include the invoice number in your payment reference. Ad spend is billed separately from management fees.