

STUDIO NAME

123 Photography Lane
City, State, ZIP
email@studio.com

INVOICE

#00001

Date: Month DD, YYYY

CLIENT

Client Names
Client Address
Client Email

EVENT DETAILS

Wedding Date: MM/DD/YYYY
Venue Name
Location

DESCRIPTION	HOURS/QTY	RATE	AMOUNT
Wedding Day Coverage (Main Photographer)	-	\$0.00	\$0.00
Second Photographer Coverage	-	\$0.00	\$0.00
Engagement Session	-	\$0.00	\$0.00

DESCRIPTION	HOURS/QTY	RATE	AMOUNT
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High-Resolution Digital Gallery	-	\$0.00	\$0.00
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Subtotal \$0.00			
Tax \$0.00			
Total \$0.00			
Deposit Paid (\$0.00)			
Balance Due \$0.00			

Payment is due 30 days prior to the event date.
Thank you for choosing us to capture your special day.