# INVOICE

[Agency Name]
[Address Line 1]
[Email/Phone]

INVOICE NUMBER
#000-00

DATE
[Date]

BILL TO

**[Client Name]**
[Client Address]
[Client Contact]

PROJECT / PERIOD

**PR Retainer Services**
[Start Date] to [End Date]

| DESCRIPTION OF SERVICES | AMOUNT |
|---|---|
| **Monthly PR Retainer Fee**<br>Strategic consulting, media relations, and brand positioning. | $0.00 |
| **Additional Expenses**<br>Wire distribution, clipping services, or travel (if applicable). | $0.00 |

Subtotal: $0.00

Tax (0%): $0.00

**Balance Due: $0.00**

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**PAYMENT INSTRUCTIONS**

Please remit payment within [Number] days via [Bank Transfer Details / Check / Online Payment].

*Thank you for your partnership.*