

[STUDIO NAME]

[Address Line 1]
[City, State, Zip]
[Email / Phone]

INVOICE

[0000]
Date: [MM/DD/YYYY]

CLIENT

[Client Name]
[Project Name/Address]
[Client Contact Info]

PROJECT PHASE

[e.g., Schematic Design / Installation]
Start Date: [MM/DD/YYYY]
Target Completion: [MM/DD/YYYY]

MILESTONE DESCRIPTION	STATUS	AMOUNT
[Milestone Name 1: e.g., Initial Concept & Floor Plans]	[Completed]	\$0.00
[Milestone Name 2: e.g., Material Selection & Lighting Plan]	[Current]	\$0.00
[Additional Fees / Reimbursables]	-	\$0.00

Subtotal \$0.00

Tax \$0.00
Total Due \$0.00

PAYMENT TERMS

Please remit payment within [15] days. Methods accepted: [Bank Transfer / Check / Credit Card].
Thank you for your business.