[DESIGNER/STUDIO NAME]

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

INVOICE

[Invoice Number]

Date: [MM/DD/YYYY]

BILL TO:

[Client Name]
[Client Company]
[Client Address]
[Client Email]

PROJECT:

[Project Title/Description]

DUE DATE:

[MM/DD/YYYY]

Description	Total Project Fee	Deposit (%)	Amount
Initial Deposit / Retainer Advance payment to commence design services for [Project Name].	$[0.00]	[50]%	$[0.00]

Subtotal: $[0.00]
Tax ([0]%): $[0.00]
DEPOSIT DUE: $[0.00]

PAYMENT INSTRUCTIONS

Please transfer funds via [Bank Transfer/PayPal/Stripe].
Bank Name: [Name] | Account: [Number] | Routing: [Number]

Note: Work will commence once the deposit has been cleared. This deposit is non-refundable.