

# DEPOSIT INVOICE

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

**Invoice #:** [00000]  
**Date:** [MM/DD/YYYY]  
**Project ID:** [STR-000]

## BILL TO

[Client Name]  
[Client Company]  
[Client Address]  
STRATEGY ENGAGEMENT

**Phase:** Initial Strategic Alignment  
**Deposit %:** [50]%

Description of Services	Total Project Fee	Deposit Amount
<b>Business Strategy Consultation &amp; Roadmap</b> Market analysis, competitive benchmarking, and 12-month strategic roadmap development.	[\$0.00]	[\$0.00]

Subtotal: [\$0.00]  
Tax (0%): [\$0.00]

**Total Deposit Due: \$[0.00]**

## PAYMENT TERMS

Please remit payment within [15] days. Strategy work will commence upon receipt of deposit.

Bank Transfer: [Bank Name] | Account: [Number] | Routing: [Number]