

# DEPOSIT INVOICE

Project: [Project Name/Phase]

[Consulting Firm Name]  
[Street Address]  
[City, State, Zip]  
[Email/Phone]

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**BILL TO:**

[Client Contact Name]  
[Client Company Name]  
[Client Address]

**INVOICE DETAILS:**

Invoice #: [00000]  
Date: [MM/DD/YYYY]  
Due Date: [MM/DD/YYYY]

Description of Services	Project Total	Deposit %	Amount Due
<b>Strategic Planning Consultation</b> Engagement Deposit for [Quarter/Year] Strategy Roadmap Development.	\$0.00	0%	\$0.00

Subtotal: \$0.00

Tax: \$0.00

**Total Deposit Due: \$0.00**

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**PAYMENT INSTRUCTIONS:**

Please make checks payable to **[Consulting Firm Name]** or pay via Wire/ACH: [Bank Details].  
*Note: Project commencement is contingent upon receipt of this deposit.*