

DEPOSIT INVOICE

Strategic Roadmap Services

[Consultancy Name]

[Business Address]

[Email/Phone]

BILL TO:

[Client Name]

[Client Address]

[Contact Email]

Invoice #: [0000]

Date: [MM/DD/YYYY]

Due Date: [MM/DD/YYYY]

Service Description	Project Total	Deposit (%)	Amount Due
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Phase 1: Strategic Roadmap & Planning

Scope: Research, Stakeholder Interviews, & Delivery of Final Roadmap.

[\$0.00]

[50]%

[\$0.00]

Subtotal: \$[0.00]

Tax: \$[0.00]

Deposit Total: \$[0.00]

Payment Instructions:

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

Note: Work on the Strategic Roadmap will commence upon receipt of this deposit.