

STUDIO NAME

123 Design District, Suite 500
New York, NY 10012

DEPOSIT INVOICE

#INV-0001
Date: [Date]

CLIENT

[Client Name]
[Property Address]
[City, State, Zip]

PROJECT

[Project Reference Name]
Phase: Concept & Procurement Deposit

DESCRIPTION OF SERVICES / GOODS	AMOUNT
Initial Design Retainer & Professional Services Fee	\$0.00
Furniture, Fixtures & Equipment (FF&E) Procurement Deposit (50%)	\$0.00

DESCRIPTION OF SERVICES / GOODS

AMOUNT

Custom Millwork & Artisanal Commissions Advance	\$0.00
---	--------

Subtotal \$0.00
Tax \$0.00
Deposit Due \$0.00

PAYMENT TERMS

Payment is due upon receipt. Design work and procurement will commence once the deposit is cleared. Please make checks payable to [Studio Name] or contact us for wire transfer instructions.

Design Excellence & Quality Craftsmanship