

STUDIO LUXE

RETAINER INVOICE

FROM

Studio Luxe Interiors
123 Design District, Suite 500
New York, NY 10001
contact@studioluxe.com

BILL TO

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

INVOICE DETAILS

Invoice #: [0000]
Date: [Month Day, Year]

PROJECT REFERENCE

[Project Title / Phase]
Due Date: Upon Receipt

DESCRIPTION OF SERVICES

AMOUNT

Initial Design Services Retainer

Non-refundable deposit applied toward design hours and architectural consultation for
[Project Name].

\$0.00

DESCRIPTION OF SERVICES

AMOUNT

Procurement & Management Fee

Initial allocation for luxury FF&E sourcing and vendor coordination.

\$0.00

Subtotal \$0.00
Tax (0%) \$0.00
Total Due \$0.00

PAYMENT INSTRUCTIONS

Wire transfer preferred. Please include invoice number in the memo. Check payments should be made payable to "Studio Luxe Interiors".

This retainer is required to commence project phases. Services are governed by the Luxury Interior Design Agreement signed on [Date].