INVOICE

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

INVOICE NUMBER

#INV-0000

DATE

[Date]

BILL TO

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

CAMPAIGN REFERENCE

[Campaign Project Name]
[Estimated Launch Date]

DESCRIPTION	AMOUNT
Campaign Initiation Deposit Non-refundable mobilization fee for project kickoff and resource allocation.	$0.00

Subtotal $0.00
Tax (0%) $0.00
Deposit Amount Due $0.00

PAYMENT TERMS & INSTRUCTIONS

Deposit is due upon receipt to initiate campaign activities. Please include the invoice number in your bank transfer reference. Work will commence once funds are cleared.

Wire/ACH Details: [Bank Name] | **Account:** [Number] | **Routing:** [Number]