[AGENCY NAME]

[Street Address]
[City, State, Zip]
[Email/Website]

DEPOSIT INVOICE

Invoice #: [000-000]
Date: [MM/DD/YYYY]
Project ID: [Project Name/Ref]

BILL TO:

[Client Name]
[Company Name]
[Client Address]
[Client Email]

Description of Services	Total Project Fee	Deposit %	Amount
[Project Description - e.g., SEO Strategy & Web Design]	$[0.00]	[00]%	$[0.00]

Subtotal: $[0.00]
Tax (if applicable): $[0.00]
Deposit Due Now: $[0.00]

Payment Terms: Deposit is required before project commencement. Remaining balance of $[0.00] will be invoiced upon [Milestone/Completion].

Payment Methods: [Bank Transfer / Credit Card / PayPal Details]