INVOICE

[Invoice Number]

[Agency Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

BILL TO: **[Client Name]**
[Client Company]
[Client Address]

CAMPAIGN DETAILS: **[Campaign Name]**
Date Issued: [Date]
Due Date: [Upon Receipt]

Description	Quantity/Hours	Rate	Amount
Upfront Campaign Strategy & Setup Market research, audience targeting, and creative development	1	$0.00	$0.00
Initial Ad Spend Deposit Pre-paid media placement budget	1	$0.00	$0.00
Campaign Management (Month 1) Optimization and reporting	1	$0.00	$0.00

Subtotal: $0.00
Tax (0%): $0.00

Total Due: $0.00

PAYMENT INSTRUCTIONS:

Please remit payment via [Bank Transfer/Check/Credit Card].
Note: This is an upfront payment invoice. Campaign activities will commence upon receipt of funds.

Thank you for your business.