DEPOSIT INVOICE

[Production Company Name]

[Address, Email, Phone]

INVOICE #
[0000]

DATE
[Date]

CLIENT / AGENCY
[Client Name]

[Billing Address]

[Contact Person]

PROJECT DETAILS
Project: [Project Name/Job #]

Shoot Location: [City, State/Location]

Shoot Dates: [Dates]

DESCRIPTION	PERCENTAGE	AMOUNT
Initial Production Deposit (Advance for Location, Talent, and Crew)	[50%]	$0.00
Insurance & Permitting Fees	[100%]	$0.00

Subtotal $0.00
Tax $0.00
Deposit Due $0.00

WIRE / PAYMENT INSTRUCTIONS
Bank: [Bank Name]
Account Name: [Account Name]
Account #: [Number]
Routing #: [Number]
SWIFT: [Code]

Terms: Production will commence only upon receipt of deposit funds. All location bookings are subject to vendor cancellation policies.