DEPOSIT INVOICE

#INV-001
Date: [Date]

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

BILL TO

[Client Name / Agency]
[Contact Person]
[Client Address]
[Tax ID/VAT if applicable]

PROJECT DETAILS

Project: [Commercial Title/Product Name]
Production Dates: [Start Date] - [End Date]
PO Number: [PO Number]

DESCRIPTION	TOTAL ESTIMATED BUDGET	DEPOSIT %	AMOUNT
Product Commercial Production Services Pre-production, Crew, Equipment, Talent, and Studio Fees	$0.00	50%	$0.00

Deposit Subtotal: $0.00
Sales Tax (0%): $0.00
TOTAL DEPOSIT DUE: $0.00

PAYMENT INSTRUCTIONS

Bank Name: [Name] | Account Name: [Name] | Account #: [Number] | Routing #: [Number] / SWIFT: [Code]
Please note: Production will commence upon receipt of the deposit funds.