

TYPOGRAPHY STUDIO

INVOICE NUMBER
#INV-0000

BILL TO Client Name / Agency
Street Address
City, State, Zip
PROJECT DETAILS Project Title: [Project Name]
Date: [Month Day, Year]
Due Date: [Month Day, Year]

SERVICE DESCRIPTION	HOURS/QTY	RATE	AMOUNT
Custom Typeface Design Initial sketches, vectorization, and character set development (A-Z, a-z, 0-9).	0.00	\$0.00	\$0.00
Kerning & OpenType Features Pair adjustment, ligatures, and stylistic alternates implementation.	0.00	\$0.00	\$0.00
Web Font Optimization Woff2 conversion, hinting for screen clarity, and subsetting.	0.00	\$0.00	\$0.00
Licensing Fee Desktop and Web license for [Number] users/pageviews.	1	\$0.00	\$0.00

Subtotal \$0.00
Tax (0%) \$0.00
Total Due \$0.00
PAYMENT TERMS

Please make checks payable to "Typography Studio" or transfer via Wire/ACH using the details provided in the contract. Net 30 days.