INVOICE

[Your Agency Name]
[Address Line 1]
[Email/Phone]

Invoice #: __________
Date: __________
Due Date: __________

BILLED TO:

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

CAMPAIGN:

[PR Campaign Name/Project Ref]
Period: [Start Date] - [End Date]

DESCRIPTION OF SERVICES	HOURS/QTY	RATE	AMOUNT
Monthly PR Retainer / Management Fee			$0.00
Media Outreach & Pitching			$0.00
Press Release Distribution (Wire Fees)			$0.00
Content Creation & Copywriting			$0.00

DESCRIPTION OF SERVICES	HOURS/QTY	RATE	AMOUNT
Clipping & Reporting Services			$0.00

Subtotal $0.00
Tax (%) $0.00

TOTAL DUE $0.00

Payment Terms: Net 30. Please make checks payable to [Agency Name] or pay via [Wire/ACH Details].

Notes: Thank you for your partnership.