STRATEGIC COMMUNICATIONS CONSULTING

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

INVOICE # [000]
DATE: [Date]
DUE DATE: [Date]

BILL TO

[Client Name]
[Company Name]
[Client Address]

PROJECT / CAMPAIGN

[Project Name or Reference Code]

DESCRIPTION OF SERVICES	HOURS/QTY	RATE	TOTAL
Crisis Management & Messaging Messaging framework and stakeholder mapping	0.00	$0.00	$0.00
Media Relations & Outreach Press release drafting and journalist pitching	0.00	$0.00	$0.00
Content Strategy & Development Executive ghostwriting and social media audit	0.00	$0.00	$0.00

Subtotal $0.00
Tax (0%) $0.00
Amount Due $0.00 USD

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Account Number] | Routing: [Routing Number]
Please include invoice number with your payment.