

INVOICE

Brand Extension Agency Name
Street Address, City, State
Email: contact@agency.com

Invoice #: [000]
Date: [Date]
Due Date: [Date]

Client Information:

[Client Name]
[Company Name]
[Address]

Project:

[Brand Extension Title]
Category: [New Product/Service Line]

Service Description	Rate/Unit	Qty/Hours	Total
Market Research & Opportunity Analysis	\$0.00	0	\$0.00
Brand Equity Assessment	\$0.00	0	\$0.00
Product Development & Concept Testing	\$0.00	0	\$0.00

Service Description	Rate/Unit	Qty/Hours	Total
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Go-to-Market Strategy & Launch Plan	\$0.00	0	\$0.00
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Subtotal: \$0.00

Tax (0%): \$0.00

Total Due: \$0.00

Payment Terms: Net 30. Please make checks payable to Agency Name.

Thank you for choosing us to grow your brand footprint.