

INVOICE

[Consultant/Agency Name]

[Address Line 1]

[Email/Phone]

Date: [MM/DD/YYYY]

Invoice #: [00000]

Project ID: [Project Name/Code]

BILL TO:

[Client Name]

[Company Name]

[Client Address]

PAYMENT TERMS:

Fixed Sum - [Net 30/Due on Receipt]

Due Date: [MM/DD/YYYY]

Description of Creative Services

Amount

[Phase or Deliverable Name]

[Brief description of work performed and results delivered]

\$0.00

[Phase or Deliverable Name]

[Brief description of work performed and results delivered]

\$0.00

Subtotal: \$0.00

Tax (0%): \$0.00

Total Amount Due: \$0.00

PAYMENT INSTRUCTIONS

Bank Name: [Name] | Account: [Number] | Routing: [Number]

Thank you for the opportunity to collaborate on this project.