AGENCY NAME

123 Marketing Way
Digital City, ST 54321
contact@agency.com

INVOICE

#INV-001
Date: [Date]
Billing Cycle: [Monthly/Quarterly]

BILL TO:

Client Company Name
Attn: Accounts Payable
Client Address Line 1
City, State, Zip

PAYMENT TERMS:

Due on Receipt
Auto-pay Enabled: [Yes/No]
Next Billing Date: [Date]

Service Description	Billing Period	Amount
Monthly Retainer: Full-Service Marketing SEO, Content, and Social Media Management	RECURRING [Month, Year]	$0.00
Ad Spend Management Fee 10% of total managed spend	[Start Date] - [End Date]	$0.00
Platform/Software Subscription Reporting Dashboard Access	Monthly	$0.00

Subtotal: $0.00

Tax (0%): $0.00

Total Amount Due: $0.00

Note: This is a recurring invoice. Your authorized payment method will be charged automatically on each billing cycle unless a cancellation request is received 30 days in advance.

Thank you for your continued partnership!