

ILLUSTRATION INVOICE

Studio Name / Artist Name

Invoice #: 001
Date: DD/MM/YYYY
PO #: Reference

ARTIST INFORMATION

Address Line 1
City, State, Zip
Email@example.com
Phone Number

BILL TO

Client Name / Company
Address Line 1
City, State, Zip
Contact Email

Description of Deliverables & Usage Rights	Qty	Rate	Total
Project Title - (e.g., Book Cover Illustration)	1	\$0.00	\$0.00
Revision Fee / Licensing Buyout	1	\$0.00	\$0.00
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Subtotal:		\$0.00	
Tax:		\$0.00	
TOTAL DUE:		\$0.00	

TERMS & RIGHTS

Rights granted: Specify usage (e.g., North American English Language Print Rights).

Payment due within 30 days. Please make checks payable to *Artist Name* or via *PayPal/Wire Transfer Details*.