[STUDIO NAME]
[Street Address]
[City, State, Zip]
[Email/Phone]

INVOICE

No: [0000]
Date: [Date]

Bill To:
[Client Name/Company]
[Client Address]
[Client Email]
Project:
[Product Name/Collection]
PO Number: [0000]
Due Date: [Date]

Description	Quantity/Hrs	Rate	Total
Product Photography (Studio/On-location)			
Advanced Retouching & Post-Production			
Styling & Prop Sourcing			
Commercial Usage License			

Subtotal: $0.00
Tax: $0.00
Amount Due: $0.00

Payment Instructions:
[Bank Name / Transfer Details / Check Payable To]

Terms:
Please pay within [X] days. Image usage rights are granted only upon receipt of full payment.