[AGENCY NAME]

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

INVOICE

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

BILL TO:

[Client Company]
[Contact Name]
[Street Address]
[City, State, Zip]

PROJECT:

[Campaign Name / Project Code]

Description of Services	Hours/Qty	Rate	Amount
Content Strategy & Consultation	[0.0]	$[0.00]	$[0.00]
Press Release Copywriting	[0.0]	$[0.00]	$[0.00]
Media Outreach & Distribution	[0.0]	$[0.00]	$[0.00]

Subtotal: $[0.00]
Tax (0%): $[0.00]
Total Due: $[0.00]

PAYMENT INSTRUCTIONS

Please make checks payable to **[Agency Name]** or wire to [Bank Details].
Thank you for your business.