

INVOICE

[Your Agency Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

INVOICE # [0001]
DATE: [Date]
DUE DATE: [Date]

BILL TO:

[Client Name/Company]
[Client Address]
[Contact Email]

CAMPAIGN:

[Campaign Name/Reference]

Service Description	Quantity/Hours	Rate	Total
Social Media Strategy & Planning	[0]	[\$[0.00]]	[\$[0.00]]
Content Creation (Graphics/Video)	[0]	[\$[0.00]]	[\$[0.00]]
Influencer Outreach & Management	[0]	[\$[0.00]]	[\$[0.00]]

Service Description	Quantity/Hours	Rate	Total
Community Management & Engagement	[0]	[\$[0.00]]	[\$[0.00]]
Paid Ad Management (SMM)	[0]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]

Tax ([0] %): \$[0.00]

Grand Total: \$[0.00]

Payment Instructions:
Please include invoice number with your payment.
Bank: [Name] | Account: [Number] | Routing: [Number]

Thank you for your business!