

INVOICE

[Your Company Name]
[Address Line 1]
[Phone Number]
[Email/Website]

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

CLIENT / BILL TO:

[Client Name]
[Property Address]
[City, State, Zip]

STAGING PROPERTY:

[Full Property Address]
[Real Estate Agent Name (Optional)]

Service Description	Hours/Qty	Rate	Amount
Occupied Consultation & Staging Report			\$0.00
Hands-on Staging (Editing & Rearranging)			\$0.00

Service Description	Hours/Qty	Rate	Amount
Accessory / Decor Rental Package			\$0.00
Delivery, Setup & De-staging Fee			\$0.00
Subtotal: \$0.00			
Tax: \$0.00			
Total Amount: \$0.00			

PAYMENT INSTRUCTIONS

Please make checks payable to [Your Name/Company]. For electronic transfers: [Zelle/Venmo/Bank Details]. Payment is due upon completion of services or as per contract agreement.

Thank you for choosing [Your Company Name] to showcase your home!