PRODUCTION COMPANY NAME

123 Studio Drive, Suite 100
Los Angeles, CA 90028
contact@production.com

INVOICE

#INV-001
Date: [Date]
Due Date: [Date]

BILL TO

Agency/Client Name
Contact Person
Address Line 1
City, State, Zip

PROJECT INFORMATION

Project: [Commercial Title/Campaign]
Job #: [Job Number]
PO #: [Purchase Order Number]

DESCRIPTION	CATEGORY	QUANTITY/DAYS	RATE	AMOUNT
Director's Fee	Creative			
Production Personnel (Labor)	Crew			
Equipment Rental (Camera/G&E)	Equipment			

DESCRIPTION	CATEGORY	QUANTITY/DAYS	RATE	AMOUNT
Studio/Location Rental	Locations			
Post-Production / Editing	Editorial			

Subtotal: $0.00
Tax: $0.00
Total Due: $0.00

PAYMENT INSTRUCTIONS

Wire Transfer: [Bank Name] | SWIFT: [Code] | Account: [Number]
Checks payable to: [Production Company Name]