

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

INVOICE

[Invoice Number]
Date: [Date]

BILL TO:

[Client Name]
[Client Company]
[Client Address]
[Client Email]

PAYMENT TERMS:

Due Date: [Date]
Payment Method: [Bank Transfer/PayPal/Check]

| Description of Services | Rate | Qty/Hrs | Total |
|---|--------|---------|--------|
| Monthly Retainer: Social Media Management Content creation, scheduling, and community management. | \$0.00 | 1 | \$0.00 |
| Paid Ad Campaign Management Strategy and monitoring for [Platform Name]. | \$0.00 | 1 | \$0.00 |
| Content Photography/Videography On-site shoot and editing. | \$0.00 | 0 | \$0.00 |
| Analytics & Reporting Monthly performance audit and strategy update. | \$0.00 | 1 | \$0.00 |

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

Total Amount: \$0.00

NOTES & INSTRUCTIONS:

Please include the invoice number with your payment. Thank you for your business!