

STUDIO INVOICE

[Studio Name]
[Address Line 1]
[Phone / Email]

Invoice #: _____
Date: _____
Project: _____

Client / Artist:

Engineer / Producer:

Date	Description (Tracking/Mixing/Mastering)	Rate/Hr	Hours	Total
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Subtotal: \$ _____
Equipment/Media Fees: \$ _____

Balance Due: \$ _____

Payment Terms: Payment is due within ___ days. Please make checks payable to _____.

Thank you for recording with us.