

# INVOICE

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

**Invoice #:** [0000]  
**Date:** [MM/DD/YYYY]  
**Project:** [Client Name/Project ID]

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## BILL TO:

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

## SHIPPING ADDRESS:

[Project Site/Receiver Name]  
[Delivery Address]  
[City, State, Zip]

ITEM / DESCRIPTION	MANUFACTURER	QTY	UNIT PRICE	TOTAL
[Furniture/Fixture Name] Specs: [Finish/Fabric/Size]	[Brand Name]	[0]	\$0.00	\$0.00
[Furniture/Fixture Name] Specs: [Finish/Fabric/Size]	[Brand Name]	[0]	\$0.00	\$0.00
[Procurement/Design Fee]	-	[1]	\$0.00	\$0.00

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Subtotal: \$0.00  
Shipping & Handling: \$0.00  
Tax: \$0.00

TOTAL DUE: \$0.00

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**Notes:** Please note that custom orders are non-refundable once production begins. Lead times are estimates and subject to manufacturer availability.

**Payment Instructions:** [Bank Transfer / Check / Credit Card Details]