INVOICE

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

Date: _____

Invoice #: _____

Client Information:

[Name]
[Address]
[Phone]

Pet Information:

[Pet Name(s)]
[Breed/Species]

Service/Item Description	Quantity	Rate	Amount
Session Fee (Duration: _____)			
Digital High-Res Images			
Physical Prints/Canvas			

Service/Item Description	Quantity	Rate	Amount
Travel/Location Fee			

Subtotal: $_____

Tax: $_____

Total Amount: $_____

Payment Terms: Due within [X] days. Please make checks payable to [Studio Name].

Notes: All images are subject to copyright. Usage rights granted upon full payment.