

[STUDIO NAME]

INVOICE NUMBER

#INV-000

FROM

[Studio Address Line 1]
[City, State, Zip]
[Email Address]

BILL TO

[Client Name / Company]
[Client Address]
[Date Issued]

PROJECT PHASE / DELIVERABLE	QTY	TOTAL
Discovery & Strategy: Brand Positioning Audit	1	\$0.00
Visual Identity: Logo Suite & Color Theory	1	\$0.00
Brand Guidelines (Digital PDF)	1	\$0.00
Collateral: Business Stationery Design	1	\$0.00

Subtotal \$0.00
Tax (0%) \$0.00
Total Due \$0.00

PAYMENT TERMS

Please remit payment within 15 days. Transfer details: [Bank Name] / [Account Number] / [SWIFT/BIC]