

INVOICE

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

Invoice #: [000]
Date: [Date]
Due Date: [Date]

BILL TO:

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

BILLING PERIOD:

[Month, Year]

Service Description	Qty/Hrs	Rate	Total
Social Media Management (Monthly Retainer)	1	\$0.00	\$0.00
Content Creation (Graphics, Copy, Video)	1	\$0.00	\$0.00
Ad Campaign Management & Optimization	1	\$0.00	\$0.00
Community Management & Engagement	1	\$0.00	\$0.00

Subtotal: \$0.00

Tax: \$0.00

Total Amount Due: \$0.00

PAYMENT INSTRUCTIONS:

Please make payment via [PayPal/Bank Transfer/Check].
Account: [Account Details] | Routing: [Routing Details]

Thank you for your business!