

Photography Project Invoice

Invoice #: _____
Date: _____
Due Date: _____

From:
Photographer Name
Address Line 1
Address Line 2
Email: _____
Phone: _____

Bill To:
Client Name
Address Line 1
Address Line 2
Email: _____
Phone: _____

Description	Date	Quantity	Unit Price	Amount
Shoot: Wedding Ceremony	____/____/____	1	_____	_____
Travel & Logistics	____/____/____	1	_____	_____
Photo Editing (x images)	____/____/____	____	_____	_____
Prints (size)	____/____/____	____	_____	_____

Subtotal _____

Tax _____

Total Due _____

Notes:
Payment is due within 30 days.
Thank you for your business.
Bank/Payment Details: _____