

# Design Studio

Professional Branding

## INVOICE

Invoice #: INV-0001

Date: 2024-06-20

Due: 2024-07-04

### Billed To

Client Name  
Company Name  
123 Client Street  
City, State ZIP  
client@email.com

### From

Your Name  
Design Studio  
456 Studio Avenue  
City, State ZIP  
your@email.com

Description	Hours	Rate	Amount
Brand Strategy Workshop	5	\$100	\$500
Logo Design	8	\$100	\$800
Visual Identity Guidelines	6	\$100	\$600
<b>Subtotal</b>			\$1,900
<b>Tax (8%)</b>			\$152
<b>Total Due</b>			<b>\$2,052</b>

### Notes

Thank you for your business. Payment is due within 14 days.

Please make payments to:

Bank Name â€“ Account #000123456789

For questions, contact your@email.com