

Logo

# Photography Invoice

From  
Photographer's Name  
Studio Name  
Street Address  
City, State, ZIP  
Phone: (xxx) xxx-xxxx  
Email: youremail@example.com

Invoice To  
Client Name  
Company (optional)  
Client Address  
City, State, ZIP  
Phone: (xxx) xxx-xxxx  
Email: client@email.com

Invoice #: INV-0001  
Date: 2024-06-16  
Due Date: 2024-07-01

## Service Details

Description	Qty	Unit Price	Amount
Wedding Photography Package	1	\$1,200.00	\$1,200.00
Extra Prints (8x10")	4	\$30.00	\$120.00
Travel Fee	1	\$80.00	\$80.00

Subtotal	\$1,400.00
Tax (5%)	\$70.00
<b>Total Due</b>	<b>\$1,470.00</b>
Amount Paid	\$0.00
<b>Balance Due</b>	<b>\$1,470.00</b>

Payment Method  
Bank Transfer: 123-456-789 | PayPal: youremail@example.com  
Notes  
Payment is due within 14 days from the invoice date. Please include the invoice number when making payment.  
For any questions, contact us at youremail@example.com.

Thank you for your business!  
© 2024 Your Photography Studio Name

