

Invoice

Invoice # _____ Invoice Date _____ Due Date _____

Photography Studio

Business Name _____ Address _____
Phone _____ Email _____

Billed To

Client Name _____ Address _____
Phone _____ Email _____

Event Details

Event Date _____ Event Location _____

Services

Description	Hours/Qty	Rate	Amount
Service/Package			
Service/Package			
Subtotal			
Tax			
Total			

Notes / Terms

Enter notes or payment terms here.