

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.