Your Company Name

INVOICE

Your Company Slogan

Street Address
City, ST ZIP Code
Phone 415.555.0100 Fax 415.555.0101

DATE: October 15, 2104
INVOICE # 101
FOR: *Photoshop enhancements during shoot*

BILL To:
Name
Company Name
Street Address
City, ST ZIP Code
Phone

DESCRIPTION	AMOUNT
TOTAL	$ -

Make all checks payable to **Your Company Name**
If you have any questions concerning this invoice, contact Name, Phone Number, Email

THANK YOU FOR YOUR BUSINESS!