



RECEIPT

Digital Illustration Services

RECEIPT NO.
DATE
PAYMENT METHOD

PROVIDER / ILLUSTRATOR

Name/Studio

Email

Portfolio/URL

CLIENT

Name/Company

Email

Project Title

SERVICE / ILLUSTRATION DESCRIPTION	QTY	RATE	AMOUNT
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USAGE RIGHTS / LICENSE SCOPE

Subtotal _____

Tax / VAT _____

Total Paid

AUTHORIZED SIGNATURE

CLIENT ACKNOWLEDGMENT