

# INVOICE

Invoice #:

Date:

Due Date:

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## CLIENT INFO

Couple Names:

Contact Name:

Email:

Phone:

## EVENT DETAILS

Wedding Date:

Ceremony Venue:

Reception Venue:

Hours of Coverage:

DESCRIPTION OF VIDEOGRAPHY SERVICES	QTY	RATE	AMOUNT

Subtotal

Tax / VAT

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Total

Deposit Paid

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**Balance Due**

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## PAYMENT TERMS & METHODS