INVOICE

VIDEOGRAPHER

Name:

Email:

Phone:

Address:

BILL TO

Client:

Project:

Email:

Address:

INVOICE METADATA

Invoice No:

Date:

Due Date:

SHOOT DETAILS

Location:

Shoot Date:

DESCRIPTION OF SERVICES	QUANTITY / HOURS	RATE	LINE TOTAL

Subtotal	
Tax	
Total Due	

PAYMENT TERMS & NOTES