PHOTOGRAPHY INVOICE

From

_____

Date: _____
INVOICE #_____

BILL TO

Name _____
Street Address 1 _____
Street Address 2 _____
City, State, Zip Code _____
Telephone _____

DESCRIPTION OF SERVICE PROVIDED

DESCRIPTION	QUANTITY	RATE	TOTAL
			$
			$
			$
			$
			$
			$
			$
		SUBTOTAL	
		TAX	
		TOTAL	

I hereby acknowledge the satisfactory completion of the above described work

Customers Signature

Date

Thank you for your business!