

ARTIST INVOICE

INVOICE DETAILS

Invoice Number: _____

Invoice Date: _____

Due Date: _____

FROM (ARTIST/STUDIO)

Artist/Business Name: _____

Address: _____

City, State ZIP: _____

Phone: _____

Email: _____

Website/Portfolio: _____

BILL TO (CLIENT)

Client Name: _____

Company Name: _____

Address: _____

City, State ZIP: _____

Phone: _____

Email: _____

PROJECT DETAILS

Project Title: _____

Purchase Order / Ref #: _____

Project Description:

ITEMIZED SERVICES

Description of Creative Work / Service	Qty / Hours	Rate	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Usage/Licensing Fee: _____		_____	_____
Expenses/Materials: _____		_____	_____

TOTALS

SUBTOTAL	\$_____
Tax (Rate: _____%)	\$_____
Shipping/Handling	\$_____
TOTAL AMOUNT	\$_____
Less Deposit/Retainer Paid	(\$_____)
TOTAL DUE	\$_____

PAYMENT METHODS

Please select payment method:

☐ Check ☐ Bank Transfer (ACH/Wire) ☐ Credit Card ☐ PayPal/Venmo/Zelle

PAYMENT INSTRUCTIONS

Make Checks Payable To:

Name: _____

Bank Transfer Details:

Bank Name: _____

Account Name: _____

Account Number: _____

Routing Number: _____

Online Payment Link/ID:

TERMS AND CONDITIONS

Payment is due by the date listed above. Late payments may be subject to a fee of

_____ % per month.

Please include the Invoice Number on your check or payment reference.

Usage Rights:

Rights to the creative work described above are transferred to the Client only upon receipt of full payment.

Usage Scope:

NOTES / COMMENTS

Thank you for your business!