MARKETING SERVICES INVOICE

AGENCY

Business name _____

Address _____

Phone / email _____

INVOICE DETAILS

Invoice no. _____

Invoice date _____

Payment terms _____

Due date _____

Billing period _____

BILL TO (CLIENT)

Company _____ Attention _____

Email _____

ENGAGEMENT

Agreement _____

Channels _____

Ad accounts _____

MONTHLY RETAINER

Item	Details	Qty	Unit	Rate	Amount

Retainer subtotal

CAMPAIGN DELIVERABLES

Item	Details	Qty	Unit	Rate	Amount

Deliverables subtotal

AD SPEND, PASSED THROUGH AT COST

Item	Details	Qty	Unit	Rate	Amount

HOW TO PAY

Accepted methods _____

Account name _____

Bank details _____

Payment reference _____

Subtotal	
Management fee on ad spend (_____%)	
Sales tax on services, if applicable (_____%)	
Ad spend, passed through at cost	
Total	
Amount due	

ENGAGEMENT NOTES

_____

_____

Please quote the invoice number with your payment.