**Photography Invoice **

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| --- | --- | --- | --- |
| No |  | Date |  |
| Job No |  | PO No |  |
| Job Period |  | Payment Terms |  |
|  |  | Due Date |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Client :** | [Company Name] | | | **Job :** |  | | |
|  | [Company Address] | | |  |  | | |
|  | [City, ST, ZIP Code] | | |  |  | | |
|  | Attn | : |  |  |  | | |
|  | Phone | : |  |  |  |  |  |
|  | Fax | : |  |  |  |  |  |
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| **No** | **Description** | | | | | **Amount** |
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|  |  |  |  | **Total** |  |  |
| Payment to : | |  |  | **Discount** |  |  |
| [Company Name] | |  |  | **State Tax** | **3%** |  |
| [Bank Name] | |  |  | **Federal Tax** |  |  |
| [Bank Account] | |  |  | **Grand Total** |  |  |