

Client/Project details

COMPANY/ORGANISATION:

TELEPHONE:

PROJECT TITLE:

CONTACT NAME:

EMAIL:

DATE:

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Production items

DESCRIPTION	HOURS	RATE	TOTAL
CLIENT MEETINGS	<input type="text"/>	<input type="text"/>	<input type="text"/>
RESEARCH	<input type="text"/>	<input type="text"/>	<input type="text"/>
CONCEPT DEVELOPMENT	<input type="text"/>	<input type="text"/>	<input type="text"/>
LAYOUT/DESIGN	<input type="text"/>	<input type="text"/>	<input type="text"/>
ART DIRECTION	<input type="text"/>	<input type="text"/>	<input type="text"/>
PHOTOSHOP	<input type="text"/>	<input type="text"/>	<input type="text"/>

DESCRIPTION	HOURS	RATE	TOTAL
VENDOR CONSULTATIONS	<input type="text"/>	<input type="text"/>	<input type="text"/>
COPYWRITING/EDITING	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROOFING	<input type="text"/>	<input type="text"/>	<input type="text"/>
PRESS APPROVALS	<input type="text"/>	<input type="text"/>	<input type="text"/>
WEB DESIGN	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER SERVICES	<input type="text"/>	<input type="text"/>	<input type="text"/>

External items

DESCRIPTION	AMOUNT
<input type="checkbox"/> PHOTOGRAPHY	<input type="text"/>
<input type="checkbox"/> PRINTING	<input type="text"/>

DESCRIPTION	AMOUNT
<input type="checkbox"/> PHOTO LIBRARY	<input type="text"/>
<input type="checkbox"/> SPECIALIST SERVICES	<input type="text"/>

DESCRIPTION	AMOUNT
<input type="checkbox"/> COMMISSIONED WORKS	<input type="text"/>
<input type="checkbox"/> OTHER SERVICES	<input type="text"/>

Cost summary

PRODUCTION ITEMS	EXTERNAL ITEMS	SUBTOTAL	GST	PROJECT TOTAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Client approval

NAME

SIGNATURE

DATE

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NOTES:

This is an estimate only. Billing will reflect the actual costs incurred. This estimate is valid only for 6 months. Client requested changes will be billed additionally. The client will be notified of any price changes. E&OE.