

INVOICE

INVOICE #: INV-20____-000

FROM / FREELANCER:

Business / Studio Name: _____
Contractor Name: _____
Email: _____
Phone: _____
Address / City, State: _____

BILLED TO / CLIENT:

Client Company: _____
Attention / Contact: _____
Issue Date: ____ / ____ / 20____
Payment Due Date: ____ / ____ / 20____
Payment Terms: Due Upon Receipt / Net 14

#	DESCRIPTION OF SERVICES / DELIVERABLES	QTY / HRS	UNIT PRICE (\$)	AMOUNT (\$)
01		_____	\$ _____	\$ _____
02		_____	\$ _____	\$ _____
03		_____	\$ _____	\$ _____
04		_____	\$ _____	\$ _____
05		_____	\$ _____	\$ _____
06		_____	\$ _____	\$ _____
07		_____	\$ _____	\$ _____
08		_____	\$ _____	\$ _____

PAYMENT METHODS & REMITTANCE:

Direct Bank Transfer: Bank: _____
Routing #: _____ Account #: _____
Online / Card: PayPal / Stripe: _____
Check Payable To: _____
Please include invoice number on payment reference memo.

Subtotal Services: \$ _____
Discounts / Promo: - \$ _____
Applicable Tax / VAT: \$ _____
Other / Shipping Fees: \$ _____

TOTAL DUE: \$ _____

CLIENT APPROVAL & PAYMENT ACKNOWLEDGMENT

Notes / Project Reference: _____

CLIENT SIGNATURE: _____

FREELANCER SIGNATURE: _____

PRINT NAME: _____

PRINT NAME: _____

DATE APPROVED: ____ / ____ / 20____

DATE ISSUED: ____ / ____ / 20____

Thank you for your business and partnership! Please submit remittance advice upon electronic transfer.