

INDEPENDENT CONTRACTOR INVOICE TEMPLATE



INDEPENDENT CONTRACTOR INVOICE

START DATE END DATE INVOICE DATE INVOICE NO.

CONTRACTOR

COMPANY NAME
ADDRESS
ADDRESS
ADDRESS
TELEPHONE
EMAIL

CLIENT

FULL NAME
ADDRESS
ADDRESS
ADDRESS
TELEPHONE
EMAIL
COMPANY NAME

CONFIRMATION

CONTRACTOR (PRINT)
CONTRACTOR (SIGNATURE)
DATE

CLIENT (PRINT)
CLIENT (SIGNATURE)
DATE

DESCRIPTION OF WORK PERFORMED	START DATE	END DATE	HOURS	RATE	TOTAL
			TOTAL HOURS		SUBTOTAL

Remarks / Instructions:	enter percentage	TAX RATE	
		TOTAL TAX	
	specify other	OTHER	
		GRAND TOTAL	
	enter initial payment amount	LESS PAYMENT	
		TOTAL DUE	

Please make check payable to

For questions concerning this invoice, please contact

THANK YOU

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