

# FREELANCE INVOICE TEMPLATE

## Your Business Name

123 Main Street

Hamilton, OH 44416

(321) 456-7890

email@address.com

## DATE

03/15/18

## INVOICE NO.

A246

## BILL TO

ATTN: Name / Dept

Company Name

123 Main Street

Hamilton, OH 44416

(321) 456-7890

## DATE PAYMENT DUE

04/15/18

## LEAD TIME

2 wks

## PROJECT DETAILS

Provide brief overview of or any pertinent information regarding the project, if applicable.

| DATE                   | DESCRIPTION OF WORK     | HOURS | RATE           | TOTAL    |
|------------------------|-------------------------|-------|----------------|----------|
| 3/11/2018              | Consultation; flat rate | 1     | \$100.00       | \$100.00 |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
|                        |                         |       |                | \$0.00   |
| REMARKS / INSTRUCTIONS |                         |       | SUBTOTAL       | \$100.00 |
| Make checks payable to |                         |       | TAX RATE 3.80% | \$3.80   |
|                        |                         |       | TOTAL          | \$103.80 |

## THANK YOU

*For questions concerning this invoice, please contact*

Name, (321) 456-7890, Email Address

www.yourwebaddress.com