

# 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
3/11/18	Consultation; flat rate	1	\$75.00	\$75.00
3/12/18	Design	12	\$50.00	\$600.00
3/13/18	Shipping	1	\$30.00	\$30.00
3/13/18	Discount	1	-\$30.00	-\$30.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
REMARKS / INSTRUCTIONS			SUBTOTAL	\$675.00
Make checks payable to			TAX RATE	3.80%
			TOTAL	\$700.65

## THANK YOU

For questions concerning this invoice, please contact

Name, (321) 456-7890, Email Address

www.yourwebaddress.com