

INDEPENDENT CONTRACTOR INVOICE TEMPLATE

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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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