INVOICE

Independent Contractor Invoice — Hourly

Invoice # _____

Date _____

Due date _____

FROM

Your name (you are the business)

Email

Phone

Tax ID / EIN (if requested)

BILL TO

Client name

Email

Address

DESCRIPTION	HOURS	RATE	AMOUNT

Subtotal	_____
Tax	_____
Total Due	_____

NOTES

Payment due within 30 days. Late payments may incur a fee.

PAYMENT INSTRUCTIONS

No tax withheld — contractor is responsible for own taxes.