

INVOICE

Independent Contractor invoice template
avoinvoice.com

FROM

Your business name _____

Address _____

Phone · email _____

BILL TO

Client name _____

Client address _____

Phone · email _____

INVOICE #	DATE	DUE DATE
_____	_____	_____
TAX ID (EIN/SSN)	SOW / PO #	
_____	_____	

DESCRIPTION	QTY × RATE	AMOUNT
Service — hours × rate		
Milestone / deliverable		
Reimbursable expense (receipt)		
Mileage (miles × rate)		

NOTES & PAYMENT TERMS

Net 15. Please pay by ACH or Zelle. A W-9 is available on request.

Subtotal

Tax

TOTAL DUE