FREELANCE WRITER INVOICE

Invoice # _____
Date: _____

Company Name: _____
Address: _____
State, City, Zip: _____
Telephone: _____
Fax: _____

To: _____
Address: _____
State, City, Zip: _____
Telephone: _____
Fax: _____

Description of Services Rendered: _____

DESCRIPTION	DATE	HOURS/ARTICLES	RATE/FEE	AMOUNT
			Total	$_____

Make_____

Thank you!