HOURLY FREELANCE INVOICE

To:
Client Name
Company
Company Address Line 2
Company Address Line 3
Post Code
Country

Your Company Name
Company Address
Company Address Line 2
Company Address Line 3
Post Code
Country
Company Registration No: If Applicable

DESCRIPTION	HOURS	RATE	AMOUNT
Description of Service	3.00	$200.00	600.00
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-

SUBTOTAL	$	600.00
TAX RATE		0.000%
TAX	$	-
DISCOUNT	$	(50.00)
TOTAL	**$**	**550.00**

OTHER COMMENTS

1. Total payment due in 30 days
2. Please include the invoice number on your check
3. To pay via PayPal, send the total to mail@web.com

Make all checks payable to:
Your Company Name

Thank You For Your Business!