

# FREELANCE INVOICE

**FROM:**

Recipient Name  
 Company Name  
 Street Address  
 City, ST ZIP Code  
 Phone: Phone Fax: Fax

**INVOICE # 100**

**DATE: .....**

**TO:**

Recipient Name  
 Company Name  
 Street Address  
 City, ST ZIP Code  
 Phone: Phone

SR NO	DESCRIPTION	TOTAL
	<b>TOTAL</b>	