

# RECEIPT

Independent Contractor Services

Receipt No: \_\_\_\_\_

Date: \_\_\_\_\_

---

## CONTRACTOR INFORMATION

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

## CLIENT INFORMATION

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

DESCRIPTION OF SERVICES RENDERED	HOURS/QTY	RATE (\$)	LINE TOTAL (\$)

## Method of Payment

Cash

Credit Card

Check

Bank Transfer

PayPal

Other

**Subtotal:** \_\_\_\_\_

**Tax / VAT:** \_\_\_\_\_

**Discount:** \_\_\_\_\_

---

**Total Paid:** \_\_\_\_\_

---

**Contractor Signature**

---

**Date**