FREELANCER INVOICE

& Payroll Claim Sheet

Invoice No: _____

Date: _____

Freelancer: _____ **Client Name:** _____

Email: _____ **Project Name:** _____

Phone: _____ **Agreement Ref:** _____

Date	Description of Services / Deliverables	Hours / Qty	Rate	Total

Subtotal	
Tax / VAT	
Adjustments	
Total Due	

Payment Method & Bank Details

Bank Name: _____

Account Name: _____

Account Number / IBAN: _____

SWIFT / BIC: _____

_____

Freelancer Signature

Date: _____

_____

Authorized Approver Signature

Date: _____