

RECEIPT

Contractor Services & Payment Confirmation

Receipt No: _____

Date: _____

Invoice Ref: _____

CONTRACTOR / FREELANCER

Name: _____

Company: _____

Address: _____

Email: _____

CLIENT

Name: _____

Company: _____

Address: _____

Email: _____

| DESCRIPTION OF SERVICES | HOURS / QTY | RATE | AMOUNT |
|-------------------------|-------------|-------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Subtotal: _____

Tax / VAT: _____

Total Paid: _____

PAYMENT METHOD & NOTES

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CONTRACTOR AUTHORIZED SIGNATURE