First and Last Name Company Name Address Line 1 Address Line 2 Phone number Email Invoice: (Number)
Date: (Date submitted)

| To: | Company Name |
|-----|-----------------|
| | Company Address |
| | Company Address |
| | Company Phone |
| | Company Email |

| For: | Job Number | | | |
|------|--------------|--|--|--|
| | Job Name | | | |
| | Job Location | | | |
| | | | | |
| | | | | |

| Description | Hours | Rates | Amount |
|---------------------------------------|-------|-------|--------|
| Date, Task, and Activity | | | |
| Example: 5.30.19, Load in for Band A. | | | |
| Date, Task, and Activity | | | |

Total:

| Per Diam | Days | Rates |
|---------------------------|------|-------------|
| Description such as dates | 4 | per website |

Total:

Total amount to be paid:

Make all checks payable to: Your name or Company Name

All invoices due within Net 30, overdue invoices will be charged a 10% late fee