Invoice #001

Invoice to:

PAYEE COMPANY ADDRESS CITY, STATE ZIP PAYEE EMAIL Pay to:

PAYER
ROLE/CONTRACTOR
ADDRESS
CITY, STATE ZIP
PAYER EMAIL

Date: January 14, 2021

Description of Services	Quantity	Unit Price	Amount
FEE-TYPE			
January 03, 2021	2.00 hours	\$15.00	\$30.00
January 04, 2021	2.00 hours	\$15.00	\$30.00
January 05, 2021	3.00 hours	\$15.00	\$45.00
January 07, 2021	1.00 hours	\$15.00	\$15.00
January 08, 2021	3.00 hours	\$15.00	\$45.00
January 12, 2021	2.50 hours	\$15.00	\$37.50
Subtotal	13.50 hours		\$202.50
		Balance Due	\$202.50