

Contractor Agreement / Invoice

Place your cursor in every field and click your mouse to begin entering information. Delete the default text in the header information (text such as [Your Name]) and replace it with the correct information. Place your cursor in the appropriate location in the table and enter the appropriate information. The form will automatically figure the correct Total amount to be billed. If there are any notations required, click the mouse just underneath the word “Miscellaneous” to access that text box. Email or print to fax/mail the form to all clients requesting an invoice.

CONTRACTOR AGREEMENT/INVOICE

NAME:

PHONE:

ADDRESS:

SSN#:

D.O.B.:

SIGNATURE _____

DATE(S) OF EVENT: _____

COMPANY: _____

EVENT: _____

LOCATION: _____

DATE	TIME IN	TIME OUT	REG HOURS	OT HOURS	TOTAL HOURS	POSITION	RATE	REG TOTAL	OT TOTAL	DAILY TOTAL
							/			
							/			
							/			
							/			
							/			

Miscellaneous:

TOTAL: