

INVOICE

In accordance with the Personal Services Agreement for the contractor listed below,
for the contract effective _____ PO No. _____
(Date listed on first line of contract)

Contractor Name _____
(Please print)

Signature _____ Date _____
(Contractor or Authorized Representative)

Amount due \$ _____ (Separate invoices must be submitted for each payment due.)

Payment Due Date _____

Make check payable to _____

Remit to Address _____

Event/Service Description _____

Check Distribution:

- Mail after the event

 - *Dept will pickup check for distribution immediately following event and the approving department certifies that payment will not be given until all services have been rendered _____.
(Initial here)
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