**Email Invoices to:** **admin@williamjamesassociation.org**

***Invoice***

**Mail to:**

**William James Association**

**P.O. Box 1632**

##### Santa Cruz, CA 95061 Date \_\_8/1/20\_\_\_\_

**Phone: (831) 607-8952**

 **Contract #** \_\_\_20-XX\_\_\_\_\_

 Facility: FAC Attendance submitted: X

**Name**: Merle Haggard

Address: 101 Sam Hill

***SAMPLE INVOICE***

 Bakersfield, CA 93303

Phone: 555-555-5555 Email: merle@mamatried.com

**Class Title**: Guitar

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Hour/Type (e.g. Instruction, Prep, CDCR or AIC Training) | Times | Times | # of Hours | x Rate | = Total |
| 7/1/20 | AIC Training | Site coord. meeting | 1-2 | 1 | 40 | 40 |
| 7/8/20 | AIC Training | Music Cohort mtg. | 1-2 | 1 | 40 | 40 |
| 7/10/20 | Instruction | Lesson Plan #2 | - | 3 | 60 | 180 |
| 7/10/20 | Prep | Lesson Plan #2 | - | 1 | 40 | 40 |
| 7/14/20 | Travel Time | Delivered LPs | - | 3 | 40 | 120 |
|  |  | - | - |  |  |  |
|  |  | - | - |  |  |  |
|  |  | -***If you previously got travel time and mileage, include it on your invoice*** | - |  |  |  |
|  |  |  | **Total Hours** |  | **Total** | 420 |

Mileage:

*See your contract as to whether mileage is budgeted.*

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Miles | x Rate | = Total |
| 7/14/20 | 100 | .575 | 57.50 |
|  |  | .575 |  |
|  |  | .575 |  |
|  |  | .575 |  |
|  |  | .575 |  |
|  |  | **Total** |  |

Supplies: ATTACH ORIGINAL RECEIPTS

|  |  |  |
| --- | --- | --- |
| Date | Vendor | Amount |
| 7/13/20 | CopyMax | 25.25 |
|  |  |  |
|  | **GRAND TOTAL THIS INVOICE** | $502.75 |

***Note:******Invoices received before or on the 5th of the month (along with Attendance and proper receipts), are scheduled to be paid on the 12th – or next business day if the 12th falls on a holiday or weekend.***

 **Artist Signature** **Date**