## **INVOICE**

## Your Name Here Your Website Here Your Phone Number Your e-mail address Your Complete Address

INVOICE NUMBER 12-XXX

My Social Security Number (Only if it is needed to be paid)

Client name and Project (DragonukConnects.com – TV Commercial)
What you did on it (Principal Actor)

Production Company or Photographer
Person to contact, Company Name Address,
Phone Number, Email Address, Website

The date In time / out time worked and pay owed (If multiple days list separately) If different Locations list as well.

**Examples:** 

06/02/12 from 8 AM to 5:30 PM \$250 Fairfax VA 06/04/12 from 3 PM to 9 PM \$250 Silver Spring MD

The total you are owed (TOTAL DUE \$500)

PLEASE make CHECK payable to BRIAN DRAGONUK
Mail to
3701 Burmont Ave
Randallstown MD 21133-2803