Enter company name here

 **INDEPENDENT CONTRACTOR**

Enter street address here

Enter city state and zip here

Phone here

Website address

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| **BILL TO**  |  | **WORK PERFORMED** |

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| **JOB** |
| **QTYS** | **DESCRIPTION** | **PRICE** | **AMOUNT** |
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| **SERVICE PERSON** | **DATE** | **HOURS** | **RATE** | **AMOUNT** |  | **PARTS** |  |
|  |  |  |  |  | **LABOUR** |  |
|  |  |  |  |  | **TAX**  |  |
|  |  |  |  |  | **TOTAL** |  |
|  |  |  |  |  | GUARANTEED 30DAYSAGAINST LABOUR ANDMATERIAL DEFECTS |
|  | **TOTAL** |  |
| COMMENTS: |

 SERVICE SUPERVISED BY SIGNED