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 30DAYS  AGAINST LABOUR AND  MATERIAL DEFECTS | | |
|  | | | | **TOTAL** |  |
| COMMENTS: | | | | | | | | |

SERVICE SUPERVISED BY SIGNED