INVOICE FOR: _____

Address:
_____
_____
_____

Phone: _____

Cell: _____

Show # or Venue: _____

Invoice #: _____
Invoice Date: _____

Bill To:

Turnkey Event Productions, Inc.
40960 California Oaks Rd., Ste. 442
Murrieta, CA 92562

Mail Check To:

_____
_____
_____
_____

Date	Position	Hours Worked	Lunch Taken:	Total Hours	Rate	Parking (if any) (*Receipt Required for Reimbursement)	Daily Total
					Grand Totals:		