

PRODUCTION ASSISTANT INVOICE

Invoice #:	
Issue Date:	

Due Date:	
Tax Rate:	

From
[PA's Name]
[Street Address]
[City, State, Zip]
[Phone]
[E-Mail]

To
[Company Name]
[Street Address]
[City, State, Zip]
[Phone]
[E-Mail]

S No	Description	Hours	\$ / Hour	Amount

PA's Terms of Duties:

- * The quick brown fox jumped upon a lazy dog.
- * The quick brown fox jumped upon a lazy dog.
- * The quick brown fox jumped upon a lazy dog.
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- * The quick brown fox jumped upon a lazy dog.

Sub Total	
Tax	
Invoice Total	