

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

DATE	QUANTITY	CLASS, SERVICE, OR HOURS // STUDENT NAME	PRICE FOR 1	TOTAL
<i>Ex: 9/5/18</i>	<i>20</i>	<i>Tutoring Hours // Sarah Smith</i>	<i>\$20</i>	<i>\$400</i>
<i>Ex: 9/5/18</i>	<i>1</i>	<i>Swim class, 6 weeks, 9/10-10/19 // Sarah Smith</i>	<i>\$80</i>	<i>\$80</i>

This invoice may be used by individuals or companies working with BCA families in lieu of creating their own invoice or receipt. If filled out completely, this invoice will work as either a receipt for reimbursements, or as an invoice for approved BCA Contractors.

TOTAL \_\_\_\_\_

AMOUNT BILLED TO BCA (Invoice) \_\_\_\_\_

AMOUNT PAID BY PARENT (Receipt) \_\_\_\_\_

PAYMENT TYPE:  CASH     CHECK     CREDIT CARD

Company Signature: \_\_\_\_\_

Date: \_\_\_\_\_