

# INVOICE

**Invoice No:**

**Name:**

**Date:**

**Address:**

**Bill to:** DZ Productions LLC  
8722 Hawk Canyon St.  
Henderson, NV 89074

**Phone:**

**Email:**

**Event name:**

**Location:**

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Date	Position and times <i>example: GAV - 7am-5pm</i>	Rate	Amount
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**Total**

*Payment terms NET 30*