

State and Regions

	INVOICE FOR PAYMENT						
	WAG	MAG	Т&Т	Rhythmic			
Stat	e / Region:						
Refe	erence / For:				Date(s):		
Paye	ee:				Role:	ach, judge, clinician, etc.)	
Stre	et Address:				(Example: Cod	acri, judge, cimician, etc.)	
City	, State, Zip:						
Emc	ıil:			Phone:			
	(example	F EXPENSE : travel, meals, arium, etc.)		DESCRIPTION OF		AMOUNT	
1		. ,				\$	
2						\$	
3						\$	
4						\$	
5						\$	

	TYPE OF EXPENSE	DESCRIPTION OF CHARGE	AMOUNT
	(example: travel, meals, honorarium, etc.)		
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$
11			\$
12			\$
13			\$
14			\$
15			\$

TOTAL:	