

CPR Independent Contractor Invoice
to John Tyler & Associates

Phone JTA: 818-530-4117
E-Mail jtyler@jtacpr.com
Web www.jtacpr.com



Date:
Terms: Due Upon Receipt
Invoice #:

Tax ID: 398-74-7804

Invoice

IC Class	.00	.00
Independent Contractor Class. Client Name: _____ Pay rate: assist: 25/class hr.; co-instruct: 40/class hr.; Solo lead instruct: \$50/class hr.		
IC Class	.00	.00
Independent Contractor Class. Client Name: _____ Pay rate: assist: 25/class hr.; co-instruct: 40/class hr.; Solo lead instruct: \$50/class hr.		
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IC Class	.00	.00
Independent Contractor Class. Client Name: _____ Pay rate: assist: 25/class hr.; co-instruct: 40/class hr.; Solo lead instruct: \$50/class hr.		
Added pay adjustments	.00	.00
Gas, or other approved expense: _____		

Submit invoices for payment to JTA by the 5th and 20th of the month to be paid by the 15th and 30th respectively. Thanks for the great teaching you do! John

Subtotal .00
Total \$0.00