



## INDEPENDENT CONTRACT

### INVOICE

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

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

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

Phone Number: \_\_\_\_\_  
Home Business Cell

Description: \_\_\_\_\_

Amount Due: \_\_\_\_\_

Contractor Signature: \_\_\_\_\_

#### Additional Information Required for Verification:

- Driver's License or Military ID
- W-9 (<http://www.irs.gov/pub/irs-pdf/fw9.pdf>)

#### Business Office Use Only

easyPurchase Information

Transaction Number: \_\_\_\_\_

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