|  |  |  |
| --- | --- | --- |
| **Your Company Name** |  | INVOICE |
| Street Address |  | **DATE:** | **Month, Day, Year** |
| City, ST ZIP Code |  | **INVOICE #** | **XXX** |
| Phone [number] Fax [number] |  |  |  |
|  |  |  |  |
| **Bill To:** |  |  |  |
| **Metro Arts: Nashville Office of Art + Culture** |  |  |  |
| **PO Box 196300** |  |  |  |
| **Nashville, TN 37219-6300** |  |  |  |
| **ATTN:**  |  |  |  |
|  |  |  |  |
| **PROJECT/SERVICE DESCRIPTION** | **AMOUNT** |
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|  |  | **TOTAL** |  |
|  |  |  |  |
| ***For Metro Arts Administrative Purposes Only:*** | **Initial** | **Date** | **Comment** |
| Program Coordinator/Project Manager |  |  | **Ok to Pay** |
| Program Manager |  |  | **Ok to Pay** |
| Use Which Program Funds? |   |