ACTOR INVOICE

PERFORMER

Name _____

Address _____

Phone / email _____

Agent / manager _____

INVOICE DETAILS

Invoice no. _____

Invoice date _____

Payment terms _____

Due date _____

Booking ref. _____

BILL TO

Production company _____ Attention _____

Billing address _____

Email _____ PO / job no. _____

BOOKING

Production _____

Role _____ Work dates _____

Location _____

PERFORMANCE FEES

Description	Qty	Unit	Rate	Amount

Performance fees subtotal _____

REIMBURSABLE EXPENSES

Description	Qty	Unit	Rate	Amount

Expenses subtotal _____

HOW TO PAY

Accepted methods _____

Account name _____

Bank details _____

Payment reference _____

Subtotal (performance fees) _____

Reimbursable expenses _____

Amount due _____

BOOKING TERMS

_____

_____

Thank you for the booking. Please quote the invoice number with your payment.