

# INVOICE

**Contractor Name**  
**Contractor Address**  
**Contractor Phone Number**  
**Contractor Point of Contract**  
**Contractor Point Contract of Phone Number**  
**Contractor Point of Contact Email Adress**

**Invoice Number:** TBD  
**Date:** TBD  
**Due Date:** TBD  
**Terms:** TBD

**BILL TO:**

**Department of General Services**  
**Facilities Management Division**  
**2000 14th Street NW, 8th Floor**  
**Washtington, DC 20009**  
**Attn: Paul Dowell**  
**Email: paul.dowell@dc.gov**

SAMPLE

**Purchase Order**  
**Number:** TBD

Item Number	Activity	Quantity	Rate	Line Item Total
001	Description of services/product provided		\$0.00	\$0.00
002	Description of services/product provided		\$0.00	\$0.00
003	Description of services/product provided		\$0.00	\$0.00
004	Description of services/product provided		\$0.00	\$0.00
005	Description of services/product provided		\$0.00	\$0.00
006	Description of services/product provided		\$0.00	\$0.00
	<b>Total Balance Due</b>		<b>\$0.00</b>	