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| **Name (exactly as it appears on W9)**  [**Street**](x-apple-data-detectors://13/0) **Address**  **City / State / Zip Code**  **Phone Number**  **Email Address**  **Vendor ID: 10000xxxxx** | INVOICE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| date: April 6, 2023  Invoice number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  purchase order number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **To:** **Museums & Cultural Affairs Dept.**  **ATTN: MCAD Business Office**  **400 W. San Antonio Ave., Suite A**  **El Paso, TX 79901** | For: **Enter MCAD Division Here (example: Museum of Art, Downtown Art & Farmers Market, etc.)** |
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| DESCRIPTION OF GOODS OR SERVICES RENDERED: | RATE OF PAY | AMOUNT: |
|  |  |  |
| **Item Description – Include Quantity and/or Date of Service** | **$ xx.xx per hour** | **$ xx.xx** |
| **Item Description – Include Quantity and/or Date of Service** | **$ xx.xx per class** | **$ xx.xx** |
| **Item Description – Include Quantity and/or Date of Service** | **$ xx.xx per event** | **$ xx.xx** |
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| **TOTAL** |  | **$ xx.xx** |
| Please make check payable to:  **Vendor Name**  Remit payment to:  **Mailing Address**  [**Street**](x-apple-data-detectors://13/0) **Address**  **City / State / Zip Code** | | |
| Thank you for your support! | | |

**PAYMENT:**

Payment will be made in accordance with the State of Texas Prompt Payment Act Texas Government Code, Title 10, Subtitle F, Chapter 2251.