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| [Company Name][Street Address][City, ST ZIP Code] | INVOICE |
| Invoice #Date: |
| To:Office of Senior Citizens Services2601 Highland Avenue SouthBirmingham, AL 35205(205) 325-1416 | For: |

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| DESCRIPTION | HOURS | RATE | AMOUNT |
| XYZ Company Personnel |  |  |  |
| Director- John Doe |  |  |  |
| Accountant-Sam Doe |  |  |  |
| Case Manager - Sally Doe |  |  |  |
|  Driver – Bob Doe |  |  |  |
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