

## **NIMPA Instrumental Music Clinician Invoice**

This invoice is for the services I provided as a clinician for \_\_\_\_\_,

Instrumental Music Director at \_\_\_\_\_ School for the

(Circle one:) Band / Orchestra Program. Date of services - \_\_\_\_\_

You will find my contact information listed below –

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email address** \_\_\_\_\_

**Amount agreed on by Instrumental Music Director and myself –**

\$ \_\_\_\_\_

**Clinician's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Director's Signature** \_\_\_\_\_

This form and the NIMPA Payment Request Form need to be completed and turned into the NPS Director of Fine Arts before payment can be sent.