



WORKPLACE WELLNESS

Invoice for Service Rendered for Critical Incident Stress Management (CISM)

Table with 2 columns: Field Name, Value. Includes sections for 'Make Checks Payable to' and 'Service Details'.

Table with 4 columns: Activity Details, Duration (hrs), Contracted Rate, Total. Includes rows for On-Site, Travel (Roundtrip), and Grand Total Invoiced.

Notes section with a large empty text area.

Bill to:

Sand Creek
610 North Main Street, Suite 200
Stillwater, MN 55082
Phone: 651.430.3383
Fax: 651.430.9753
www.sandcreekeap.com

Thank you for your service that you provided on behalf of Sand Creek.