

NAME: _____
ADDRESS: _____
CITY: _____
PROVINCE: _____
POSTAL CODE: _____
PHONE: _____
EMAIL: _____
GST #: _____

INVOICE DATE: _____

TO: SHUMKA SCHOOL OF DANCE

10515 111 Street NW
 Edmonton, AB T5H 3E8
 Phone: 780.455.9559
 Fax: 780.455.7889
 Email: whirlwind@shumka.com



CLASS	DATES	HOURS	RATE	AMOUNT
SUB TOTAL				\$
GST (if applicable)				
FINAL TOTAL				\$

NOTE: The Contractor is responsible for submitting invoices by the 25th of every month, for work already completed between the 26th of the previous month to the 25th of the current month.