

Statement of Services Provided

Date:

Client Name:

Service Provider:

Service Description	Date Provided	Hours/Quantity	Rate	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Notes/Comments:

Prepared by:

Signature:

Date: