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Invoice #

Date:

**Name:** **Hartman Management**

**Address: 2909 Hillcroft, Suite 420**

**City/State/Zip Code: Houston, TX 77057**

**Tel/Fax: 713-467-2222**

Bill To:

Invoice

NAME:

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| --- | --- | --- | --- |
| Description | Hours | Rate per hour | Total |
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| **TOTAL** |  |  |  |

Thank You for Your Business