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# INVOICE

**PURCHASE ORDER/JOB NO: TBS**

**DATE: XX/2025**

**Company/Agency:** \_\_\_\_\_

**Address:**

**City, State & Zip:** \_\_\_\_\_

TEAM MEMBER	TDLR PROJECT NO.	DATE COMPLETED	TERMS
BB	_____	_____	Due Upon Receipt

PROJECT NAME	DESCRIPTION OF SERVICE	AMOUNT
		\$_____
*TOTAL AMOUNT DUE		\$_____

**\*Note: All fees must be paid prior to the performance of any service, per TDLR Rule.**

Make checks or money orders payable to: 'Texas Access' at the above address.

**IMPORTANT:** Be sure to include a copy of this invoice, or the TDLR Project No. with your payment so that we will know what project to apply it to.

If there are any questions please contact Texas Access at (800) 880-6986.

**THANKS FOR THE OPPORTUNITY TO SERVE YOU!**