No Kidding 2006-2007 Intern Invoice

Name:		**Date:**
Address:		**Telephone:**
Pay period: Starts the 16th of (circle) Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Ends the 15th of (circle) Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr M		
TRAININGS & MEETINGS		
Date	# of Hours	Training or Team Meeting
Total Hours		
Pay rate		
Subtotal		
PRESENTATIONS		
Date	# of Presentations	Location
Total Presentations		
Pay rate		
Subtotal		
OTHER (Job Readiness, Community Service)		
Date	Pay	Description
Subtotal		
TOTAL PAYMENT		
Subtotal for Trainings & Meetings		
Subtotal for Presentations		
Subtotal for Other		
TOTAL PAYMENT		

Please return to YouthLaunch by the 22nd of each month
3701 Executive Center Dr. #210, Austin TX 78731

Please fill this page out only if you did not have room to enter all the items on the front.

TRAININGS & MEETINGS (overflow from front)		
Date	# of Hours	Training or Team Meeting
PRESENTATIONS (overflow from front)		
Date	# of Presentations	Location
OTHER (Job Readiness, Community Service) (overflow from front)		
Date	Pay	Description