

Form must be received by mail or email no later than April 25 to be paid.

Please print your information

You can also submit this form online at: Thursdaymusical.org/submit-an-invoice

| Name: | |
|--|-------------|
| Address: | ı |
| City, State and Zip: | ı |
| Email Address: | 1 |
| Phone Number: | ı |
| Performance Date: | ı |
| Stipend Amount: \$75.00 per member | |
| Honorarium Amount: We are pleased to offer honoraria for artists performing on th Musical Artist Series. Up to four Thursday Musical members per performing group m \$75 each. (Thursday Musical does not fund honoraria for nonmembers performing in You will receive a check within three to four weeks of our receiving your form. | nay receive |
| I would like to donate my Honorarium back to Thursday Musical: 🖵 Yes | □ No |
| Please mail this form to: Thursday Musical | |

P.O. Box 16568
St. Louis Park, MN 55416
T: (612) 333 0313

E: info@thursdaymusical.org

Accounting Use Only

| Date Received: | | Invoice #: | Honorarium |
|---------------------|---|-----------------------|------------|
| Service Code: | MS – 5200.7 Thursday Musical Artist Series | Performance Verified: | Yes or No |
| Note to Accountant: | | | |