EXAMPLE INVOICE FORMAT

Your invoice should include all the relevant information found in this example, with the categories that reflect your project budget and what you’re invoicing for. The highlighted sections represent text or dollar amounts for you to insert. Enclose all appropriate itemized receipts. If invoicing for a purchase from an online store, please include the receipt that says the product has already shipped (not one that just says it was ordered). If you’re invoicing for travel, include a Travel Expense Claim with your invoice. If available, please use your organization’s letterhead for invoices. Please submit your invoices by email to Annie.Frankel@coastal.ca.gov.

Date: Date (THIS IS THE DATE YOU’RE SIGNING/SUBMITTING YOUR INVOICE.)
Invoice # X (THIS IS AN INTERNAL NUMBER ASSIGNED BY YOU.)
Grant # XX-XX-XX (THIS NUMBER IS FOUND ON YOUR GRANT AGREEMENT.)
Invoice Period: Date - Date (DATE RANGE COVERS THE HOURS BEING BILLED AND THE DATES ON ENCLOSED RECEIPTS.)

California Coastal Commission
Attn: Annie Kohut Frankel
455 Market Street, Suite 200, Room 228
San Francisco, CA 94105

Remit payment to My Organization for the following amount:

Salary and Wages
Position Title  Xhrs x $X/hr = $XXX
Position Title  Xhrs x $X/hr = $XXX
Subtotal Salary and Wages $XXX
Benefits $XXX
Subtotal Personnel Services $XXX

Operating Expenses
Postage/Shipping $XXX
Supplies/Materials $XXX
Printing $XXX
Travel $XXX
Contracts External $XXX
Subtotal Operating Expenses $XXX
Administrative Overhead $XXX

Total $XXX

Signature
My Name
My Organization
Address
Phone number
Email