INVOICE

Invoice No:

Date:

Payment Due:

Lobbyist Reg No:

CLIENT INFORMATION

SUBJECT MATTER / BILL NO.

DATE	DESCRIPTION OF LOBBYING ACTIVITY / SERVICES	HOURS	RATE ($)	AMOUNT ($)
	Reimbursable Expenses:			

Services Subtotal:

Expenses Total:

Total Due:

Payment Terms & Instructions

LOBBYING DISCLOSURE & COMPLIANCE CERTIFICATION

This invoice is submitted in compliance with applicable local, state, and federal lobbying disclosure laws. The services detailed above have been/will be reported in accordance with statutory registration and reporting requirements.

Lobbyist/Firm Representative Signature:

Date: