# GOVERNMENT RELATIONS & ADVOCACY

# INVOICE

LOBBYING REGISTRATION / ID NO.

| INVOICE NUMBER | DATE | DUE DATE | BILLING PERIOD |
|---|---|---|---|
| | | | |

## CLIENT INFORMATION

CLIENT NAME

DIVISION / DEPARTMENT

ADDRESS

## MATTER / REPRESENTATION DETAILS

LEGISLATIVE DOCKET / BILL NO.

SUBJECT MATTER / CAMPAIGN

AGREEMENT / CONTRACT REF

## PROFESSIONAL SERVICES RENDERED

| DATE | DESCRIPTION OF ADVOCACY / CONSULTING ACTIVITY | HOURS | RATE | AMOUNT |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | *Retainer / Fixed Fee Services* | | | |

## DIRECT LEGISLATIVE / CAMPAIGN DISBURSEMENTS

| DATE | EXPENSE CATEGORY (TRAVEL, EVENTS, FILING FEES, MATERIALS) | AMOUNT |
|---|---|---|
| | | |
| | | |

SERVICES SUBTOTAL

EXPENSES SUBTOTAL

**TOTAL BALANCE DUE** _____

**COMPLIANCE & LOBBYING DISCLOSURE CERTIFICATION**

All services detailed above conform to applicable federal, state, and local lobbying disclosure laws and ethics guidelines. No lobbying-related expenses or campaign contributions invoiced herein violate the Honest Leadership and Open Government Act or corresponding jurisdiction statutes.

**PAYMENT TERMS & INSTRUCTIONS**

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**AUTHORIZED SIGNATURE**

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*Government Relations Principal / Consultant*