

Company Name: ① ABC Company, Inc
Remittance Address: ③ 5646 University Way
 San Diego, Ca 96548-6548
UCSD Agreement #: ⑩ ABC-15-3
Authorization #: ⑪ ABC-15-3.1
Project #: ⑫ 4896/954898
Project Name: ⑬ Muir Biology Third Floor Renovation
Federal ID#: ② 12-65465879
Contact Name: ④ Billings Person
Contact Phone #: ⑤ 619-654-6846
Contact Email: ⑥ billingsperson@ABCCompany.com
Invoice #: ⑦ INV123456
Invoice Date: ⑧ 3/12/16
Period To: ⑨ 2/28/16

⑭ **W-9 Section – Please check if any of the following has changed (more than one box may be checked).**

Address Change
 Name Change
 Federal ID Change

If you indicated a change above, please click <http://www.irs.gov/pub/irs-pdf/fw9.pdf> to get the latest W-9 form. Complete, sign and email a scanned copy to CPM-Fiscal@ucsd.edu.

⑮ SERVICES	AMOUNT
ORIGINAL AUTHORIZED AGREEMENT (W/O REIMB):	\$5,000.00
TOTAL AUTHORIZED CHANGES (if applicable)	\$75.00
TOTAL AUTHORIZED SERVICES:	\$5,075.00
TOTAL PREVIOUSLY BILLED:	\$2,000.00
TOTAL SERVICES THIS INVOICE:	\$500.00
BILLED TO DATE (INCLUDING THIS BILLING):	\$2,500.00
AUTHORIZED FEE REMAINING:	\$2,575.00
⑯ REIMBURSABLES	AMOUNT
ORIGINAL AUTHORIZED AGREEMENT:	\$500.00
TOTAL AUTHORIZED CHANGES (if applicable):	\$50.00
TOAL AUTHORIZED REIMBURSABLES:	550.00
TOTAL PREVIOUSLY BILLED:	\$200.00
TOTAL REIMBURSABLES THIS INVOICE	\$300.00
BILLED TO DATE (INCLUDE THIS BILLING):	\$ 500.00
AUTHORIZED REIMBURSABLES REMAINING:	\$ 50.00

⑰ **GRAND TOTAL (SERVICES + REIMBURSABLES):** **\$ 800.00**

⑱ **100% PERCENTAGE OF WORK COMPLETED IN CALIFORNIA** (typically 100%)

When complete, please email a copy of this form and any supplementary documentation as one PDF file (CPM invoice must be page 1) to CPM-Fiscal@ucsd.edu.