## Attachment "C" Invoice and Activity Log Sheet

Date:	
CONTRACTOR/Secretary Name:	
CONTRACTOR/Secretary Address:	
CONTRACTOR/Secretary Telephone Number:	
CONTRACTOR/Secretary Email Address:	
Purchase Order Number:	
Name of TAB Supported:	
For Month/Year Submitted:	
Total Amount Requested:	
F 41	

## For this invoice period:

Invoice/Activity Log Sheet is complete and attached
Agendas have been submitted and uploaded timely
Meeting minutes and audio files have been submitted and uploaded timely
TAB liaison has reviewed prior to submission (Liaison initials)

I certify that all information listed on this invoice and activity log sheet is true and correct. I understand that purposely providing false information or failing to disclose correct information may result in delay or denial of my compensation. I understand that an electronic signature has the same weight and effect as a handwritten signature. Furthermore, I understand that any modification to this invoice and activity log sheet or submission of an incomplete invoice and activity log sheet will not be accepted.

## Log of CONTRACTOR/Secretary Activities for the Month:

## **CONTRACTOR/Secretarial Functions for the Support of:**

(Name of TAB)

For Month/Year Submitted:

Date	Meeting					
	# of Zoning Items	# of Other Items	Meeting Length (in Hours)	Hours for Customer Service Work	Customer Administrative	Notes (if applicable)
Total:						
Total Tir Work:	ne Spent f	or Meeti	ng, Custor	ner Service, and	Administrative	

\*If you need additional space, please attach an additional sheet of paper.