



## Invoice Errors Identified

| Missing or Incorrect Information |                                |                          |                           |
|----------------------------------|--------------------------------|--------------------------|---------------------------|
| <input type="checkbox"/>         | CCCCO (Grant) Agreement Number | <input type="checkbox"/> | Date of Services Rendered |
| <input type="checkbox"/>         | Letterhead/Logo                | <input type="checkbox"/> | Description of Work       |
| <input type="checkbox"/>         | Invoice Date                   | <input type="checkbox"/> | Enactment Year            |
| <input type="checkbox"/>         | Entity Name                    | <input type="checkbox"/> | FI\$Cal Program Number    |
| <input type="checkbox"/>         | Entity Address                 | <input type="checkbox"/> | Subtask Number            |
| <input type="checkbox"/>         | CCCCO Project Monitor          | <input type="checkbox"/> | Object of Expenditure     |
| <input type="checkbox"/>         | Payment Type                   | <input type="checkbox"/> | Total Amount Due          |
| Notes                            |                                |                          |                           |
|                                  |                                |                          |                           |