

INVOICE

Date: 05/01/2018

Invoice Number: 0125

Due: 06/01/2018

To: Attention: Brianna Doyon

The Great Waterway

650 Dalton Ave, Suite 230

Kingston ON K7M 8N7

Partnership Fund Project: Project Name

From: Sample Business

123 Street

Kingston, ON A1B 2C3

Invoice Requirements

1. All invoices must be made out to RTO 9.
2. Include the Partnership Fund Project name (this may be included in the cc field)
3. Include the Vendor address and name
4. Include the due date
5. Include the service or item that was performed/received
6. Include any HST if applicable apart from the total
7. All invoices must be submitted by the Partnership Fund Recipient and **NOT** the third-party Vendor.

Service/Item Description	Cost	HST	Total
Sample Service	\$500.00	\$65.00	\$565.00
TOTAL:			

Please make cheque payable to:

Contact or Business Name

Address if different from above.