

Company Name

INVOICE

Street Address
City, ST ZIP Code
Phone: Phone Fax: Fax

INVOICE # 100
DATE:

TO:
StopWaste
1537 Webster Street
Oakland, CA 94612

	DESCRIPTION	TOTAL
	StopWaste Grant – Payment 1 of 2	10,000
	Supporting documentation per scope of services attached	

Make all checks payable to **Company Name**
If you have any questions concerning this invoice, contact Name, Phone, Email