

**Louisiana Transportation Research Center | MONTHLY INVOICE FOR RESEARCH PROJECTS**

REMIT TO:	PHONE:	DATE:
		INVOICE NUMBER:
PROJECT NAME		STATE PROJECT NUMBER:
INVOICE PERIOD:	FROM: TO:	LTRC STUDY NUMBER:

**1. EQUIPMENT**

ARTICLES OR SERVICES DESCRIPTION	DATE OF PAYMENT	VOUCHER NUMBER	QUANTITY	AMOUNT

**2. MATERIALS, RENTALS AND SERVICES**

ARTICLES OR SERVICES DESCRIPTION	DATE OF PAYMENT	VOUCHER NUMBER	QUANTITY	AMOUNT

**3. PERSONNEL COSTS**

NAME	HOURLY OR MONTHLY RATE	HOURS OR PERCENT	CHARGE
TOTAL		\$	
EMPLOYEE BENEFITS (%)		\$	
TOTAL PERSONNEL COSTS		\$	

**4. TRAVEL**

MILEAGE	MILES AT	PER MILE	AMOUNT
SUBSISTENCE - NAMES			
OTHER EXPENSES (SPECIFY)			
TOTAL TRAVEL			

**SUMMARY OF INVOICED COSTS**

1. EQUIPMENT	\$
2. MATERIALS, RENTALS AND SERVICES	\$
3. PERSONNEL	\$
4. TRAVEL	\$
<b>SUBTOTAL</b>	\$
INDIRECT COSTS @	%
<b>VOUCHER TOTAL</b>	\$

**FY FUNDS CANNOT BE EXCEEDED WITHOUT AUTHORIZATION**

"I CERTIFY THAT THE ABOVE BILLING IS CORRECT AND JUST AND THAT NEITHER PAYMENT NOR CREDIT HAS BEEN RECEIVED."

BY:

\_\_\_\_\_ AUDITOR

P.I.'s:

\_\_\_\_\_

BALANCE	FOR FISCAL YEAR	FOR PROJECT
STUDY BUDGET	\$	\$
PREVIOUS PAYMENTS	\$	\$
PREVIOUS BALANCE	\$	\$
AMOUNT DUE THIS INVOICE	\$	\$

**DO NOT WRITE IN THIS SPACE**

CHECKED BY:
APPROVED:
DATE: