

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	\$
SUBTOTAL	\$
INDIRECT COSTS @	%
VOUCHER TOTAL	\$

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: