

ATTACHMENT E - 2017 INVOICE FORM
QUARTERLY BILLING - ANIMAL SERVICES INTERLOCAL AGREEMENT



Invoice Number:	Invoice Date:
Bill to: Travis County Health and Human Services & Veterans Service	

Program Costs	Budget	Total Expenditures				Remaining Balance
		Q1 (10/1/2016-12/31/16)	Q2 (1/1/2017-3/31/17)	Q3 (4/1/2017-6/30/17)	Q4 (7/1/2017-9/30/17)	
Animal Control (including Rabies and Dispatch)	553,276					553,276
Prevention	38,477					38,477
Shelter Services	911,134					911,134
Spay/Neuter Clinic	100,000					100,000
County Vehicle Replacement	38,195					38,195
Total	1,641,082	0	0	0	0	1,641,082

CERTIFICATION

The City's signatures below certify that this Payment Request and the corresponding Cost Model workbook and financial reports have been made in accordance with the terms and conditions of the Interlocal. The City further certifies that all information provided is correct and that the amounts invoiced are their reimbursable expenses.

Authorized Signature for City	Title	Date

Authorized Signature's Printed Name

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Preparer's Signature	Title	Date

Preparer's Signature Printed Name

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PAYMENT APPROVAL - (TRAVIS CO. Staff)

The Travis County signatures below certify that this Payment Request, the corresponding Cost Model workbook and financial reports have been audited and are in accordance with the terms and conditions of the Interlocal. No concerns were noted and this request may be processed for payment.

TCHHS/VS Financial Approval	Date
TCHHS/VS Contract Compliance Approval	Date
TCHHS/VS Accounting Approval	AMOUNT APPROVED
PO Receipt Number	Purchase Order Number

Staff Comments: