

CCMU TRIBAL VEHICLE FUNDING INVOICE TEMPLATE

EMAIL COMPLETED INVOICE AND RECEIPTS FOR EQUIPMENT, IF APPLICABLE, TO AP2@AHPNET.COM

Advocates For Human Potential, Inc.

Instructions for CCMU Tribal Vehicle Funding Invoice Template

Grantee Quarterly Deliverables Invoice

1. Invoices are to be completed and submitted to AHP promptly upon completion of deliverables.
2. Complete the top portion of the invoice with your organization name, address, and phone and email contact information.
3. Refer to the "Statement of Work" (SOW) provided with your Subcontract Agreement, and fill out the invoice grid with the following information:
 - a. **Funding Advance:** If your SOW includes a funding advance, you can invoice for that amount immediately upon execution of your contract. Please insert the deliverable amount, as outlined in your SOW, in the deliverable amount column and attach documentation to the invoice supporting the utilization of the funding advance (vendor cost estimate, purchase order invoice, sales quote)
 - b. **Vehicle Purchase:** If a vehicle was purchased in full in the quarter, list each vehicle with a short description, including modification. Provide the actual purchase cost (as confirmed by purchase receipt) in the deliverable amount column. If you received a funding advance, the funding advance amount should be subtracted from the total cost of the vehicle(s) and may not exceed the dollar amount as outlined in your contract SOW.
 - c. **Deliverable Description:** Please leave all written deliverables in **BOLD**, even if you did not complete the deliverables listed. Deliverable amount should reflect EXACTLY what is listed in the contract SOW.
4. Please be sure to verify your total; an invoice with incorrect values will be returned to the subcontractor for re-submission.
5. Sign and date the invoice where indicated. If you are submitting for equipment purchased within the quarter, please scan the receipts to substantiate purchases, along with the invoice form, into 1 PDF document and email to [this email](#).
6. Payment shall be remitted, depending on grantee's noted preference, via First Class Mail or direct deposit within 10 business days after being received by AHP's A/P, and reviewed, approved and signed by the Project Director, Grantee Liaison, and Accounting. No invoice will be approved for payment if you do not have your fully executed subcontract, or if A/P does not have your signed W-9 form on file.
7. Questions or concerns regarding AHP's invoicing, and payment process may be directed to our Accounts Payable department at [this email](#).

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Grantee Quarterly Deliverables Invoice

Agency Name:

Address:

Submitted by name:

Submitted by email:

Telephone #:

Project #: 7460.01

7460.01-004

Funding Advance

Deliverable Amount

IF APPLICABLE: Funding advance, per contract Statement of Work (SOW)

Vehicle and Modification Purchase(s)

Deliverable Amount

1 – Passenger Van w/ ADA lift
1- Sedan

\$

Deliverable Description

The text below is part of the template. DO NOT DELETE OR EDIT. If any items below are not included in your contract SOW, please leave as is.

Deliverable Amount

- a. **Maintain vehicles for Mobile Crisis and Non-Crisis Behavioral Health Services** including insurance, maintenance, and repairs to keep in good working order, fuel, and parking).
- b. **Maintain documentation of expenses** for submission.
- c. **Prepare quarterly report, detailing purchase activity and service data**, with all invoices for submission by the fifteenth day of the first month of the next quarter.

\$

Total Amount Due

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Subcontractor Signature

Date

Email completed invoice and documentation of purchase for equipment, if applicable to [this email](#).

Payment terms are 10 business days after being reviewed, approved and signed by the Project Director, Grantee Liaison, and Accounting.

No invoice will be approved for payment if AHP does not have your executed Subcontractor Agreement and signed W-9 on file and completed Quarterly Report.