**0110-FM-EEIC0105a 10/2022**

**Invoice**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DEP Logo**ENVIRONMENTAL EDUCATION GRANTS PROGRAM** | | | | | | | | | | | |
| **INVOICE** | | | | | | | | | | | |
| **SUBMIT INVOICE TO:** | | |  | | | ***For DEP Use Only*** | | | | | |
| **Environmental Education Grants Program** | | |  | | | **Invoice Date** | | | | |  |
| **PA Dept. Of Environmental Protection** | | |  | | | **Invoice Number** | | | | |  |
| **Email: RA-epEEgrants@pa.gov** | | |  | | | **Invoice Amount** | | | | |  |
| **Failure to provide complete and accurate information may result in delayed processing of the reimbursement request.** | | | | | | | | | | | |
| **GRANTEE INFORMATION** | | | | | | | | | | | |
| **Project Title** | |  | | | | | | | | | |
| **Grantee (Name of Administering Organization)** | |  | | | | | | | | | |
| **SAP Agreement # (C99XXXXXXX)** | |  | | | | **Vendor ID #** | | | |  | |
| **Contact Name** | |  | | | | **Email** | |  | | | |
| **Contact Phone** | |  | | | |  | | | | | |
| **Partner Bank Type (e.g. BN01, BN02, ED01, etc.)** | | | | | |  | | | | | |
| **REIMBURSEMENT REQUEST** | | | | | | | | | | | |
| **Expense Period (Month, Day, Year)** | | **FROM:** | | |  | | **TO:** | | | |  |
| **Total amount of GRANT FUNDS to be reimbursed this period** | | | | | | | | | | |  |
| **Total amount of MATCH provided this period** | | | | | | | | | | |  |
| **Grantee SIGNATURE** | | | | | | | | | | | |
| **I declare the SAP Vendor record is current and the above information to be true and accurate:** | | | | | | | | | | | |
|  | | | |  | | | | | | |  |
| **Project Leader or Authorized Official Signature**  **(use ink pen or provide official electronic)** | | | | **Title** | | | | | | | **Date** |
|  | | | |  | | | | | | | |
| **Legibly print or type name (Project Leader or Authorized Official)** | | | |
| **Grantee verifies that all information contained in their SAP Vendor record, including address and banking information, is current at time of signature. Incorrect information on the SAP Vendor record can result in considerable delays in payment.** | | | | | | | | | | | |
| **NOTE: Reimbursement request will not be processed without an acceptable MIDTERM or FINAL Progress Report** | | | | | | | | | | | |
| ***For DEP Use Only*** | | | | | | | | | | | |
| **EEIC Approval** |  | | | | **Grant Center Approval** | | | |  | | |
| **Title** |  | | | | **Title** | | | |  | | |
| **Date Approved** |  | | | | **Date Approved** | | | |  | | |