

Standard Contract
EXHIBIT 3

INVOICE SUMMARY

Company Name/Letterhead
Remit to Address
City, State, Zip Code

SAMPLE

Date

Invoice # _____

San Bernardino County
Department of Public Works
Solid Waste Management Division
222 W. Hospitality Lane, 2nd Floor

San Bernardino, CA 92415-0017

Attention: Fiscal Section

Project Title: "Anytown" Landfill / Transfer Station

Description of the Project: Trouble Call / Repair / Calibration

Contract #: 00-000

INVOICE SUMMARY

Site Location	Task #	Scope of Work	Amount	Less	Net Amount
"Anytown"	100	Technician Labor #1	\$	(\$)	\$
"Anytown"	200	Technician Labor #2	\$	(\$)	\$
"Anytown"	500	Truck Mileage / Cost	\$	(\$)	\$
"Anytown"	900	Calibration Certificate			
		Total Current Charges	\$ (\$)		
		Total Charges Due	\$		

Submitted by: _____
(Name) (Title)

(Telephone)

Note: ALL terminology should be consistent with language used in the contract.