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| **1.** | Invoice must include **ALL** fields of information on the Invoice Template Example. |
| **2.** | Invoice must be submitted electronically to: accountspayable@cccco.edu |
| **3.** | **Email Subject Line** | Include the (State) CCCCO Project Monitor’s Name.Format:* Invoice Enclosed – Grant Number –Project Monitor’s Name, or
* Rev # Invoice Enclosed – Grant Number - Project Monitor’s Name

Eg. Invoice Enclosed 18-034-999-001 Stephanie Ricks-Albert*Note:* This will reduce processing time by identifying the appropriate division fiscal liaison. |
| **4.** | **Letterhead/Logo** | Use district letterhead or logo image. |
| **5.** | **Invoice Date** | The field **must be** **labeled** “Invoice Date.” Enter the date the invoice was created.*Note:* The CA State Controller’s Office requires the field label to be “Invoice Date” not just “Date.” |
| **6.** | **Invoice No.** | The invoice number must be unique and cannot be used more than once. Enter an invoice number that is at least a combination of:1) Grant Number and 2) local community college district invoice number.*Note:* * The CA State Controller’s Office only allows the invoice number to be included on the check. This causes confusion about what project the payment it tied to.
* This practice would tie the check payment to the associated grant immediately to allow for easy tracking of grant program payments. This practice will reduce processing time between the Community College District (CCD) and the CCCCO Accounting Office by eliminating:
1. the CCD from making an inquiry to the CCCCO Accounting Office to obtain the grant number,
2. the CCD waiting for a reply from the CCCCO Accounting Office,
3. the CCCCO Accounting Office sorting thru numerous email/voicemail inquiries, and flagging those that require a reply,
4. the CCCCO Accounting Office from researching to find the grant number for the check,
5. the CCCCO Accounting Office replying to the numerous inquiries from CCDs.
* Consider using the MIS College Code *after* the grant number. Eg. 18-034-999-111.001 (111 = MIS College Code for Butte College). The next sequence of invoice numbers would be 18-034-999-111.002, 18-034-999-111.003, 18-034-999-111.004, 18-034-999-111.005, etc.
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| **7.** | **Name** | From the dropdown list, select the name of the District or hand-write the name.*Note:* District name must match the Grant Agreement Face Sheet. |
| **8.** | **Address** | Enter the District (not college) address.*Note:* Address must match the Grant Agreement Face Sheet. |
| **9.** | **CCCCO Agreement No.** | Enter the grant number.*Note:* Grant number must match the Grant Agreement Face Sheet. |
| **10.** | **CCCCO Project Monitor / Program Name** | Enter the (State) CCCCO Project Monitor’s name and Program Name. This is not the name of the local college Program Director.Eg. Stephanie Ricks-Albert, Mathematics, Engineering & Science Achievement (MESA) Grant*Note:* The Project Monitor must match the Grant Agreement Face Sheet. |
| **11.** | **Payment Type** | Identify the payment type (Advance, Progress, Final or other payment).If “other payment” is selected, provide a brief description of the payment type.*Note:** Districts cannot invoice for an Advance payment then invoice for a Quarterly payment.
* The Advance, Progress and Final payment type cannot be combined with the Quarterly payment type (Q1, Q2, Q3, Q4).
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| **12.** | **Date Service(s) Rendered and Description of Work** | Provide the dates of service(s) rendered and a description of the work performed (state the purpose of the program).*Note:* Service dates for subsequent invoices cannot overlap previous service dates. |
| **13.** | **Enactment Fiscal Year, Fiscal Program, Sub Task, and Object of Expenditure** | Enter the Fiscal Year the grant was funded.*Note:* * Fiscal Year must match the Grant Agreement Face Sheet.
* An invoice must identify one (1) fiscal year and one (1) funding source.
* Grants with “braided funding,” requires an invoice for *each* fiscal year and *each* funding source.
* An invoice with two (2) different fiscal year funds (FY 2016/17 and 2017-18) or two (2) different funding sources, will not be processed.
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| **14.** | **Total Amount Due** | Enter the exact amount of expenditures, including cents. (e.g. $21,400.15)*Note:* * An invoice amount including cents cannot be rounded up or down.
* The invoice amount cannot be more than the payment allowance identified in Article I of the RFA.
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| **15.** | **District/College Accounting Office Contact Information** | Identify the district/college accounting office contact person. |
| **16.** | **District/College Program Contact Information** | Identify the district/college program contact person who can address questions about the work performed. |
| **17.** | **Contact for Invoice Questions** | * (State) CCCCO Program Monitor - Stephanie Ricks-Albert, or
* (State) CCCCO Accounting Office at: accountingoffice@cccco.edu.
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