

Invoice # _____

State of Louisiana

Parish of East Baton Rouge

Invoice for Consulting Services

(Name) (City) (State) (Zip Code)
(hereinafter referred to as "Consultant") do hereby request payment of \$_____ from
the Louisiana Board of Regents for services rendered from _____ through
_____ as follows:

_____.

Consultant shall be paid upon Board of Regent's receipt of the documents explained above and subject to the availability and appropriation of funds in accordance with ACT 591 of the 1999 Regular Session of the Louisiana Legislature.

Consultant hereby agrees that the responsibility for payment of taxes from the funds thus received under this invoice and/or legislative appropriation shall be said Consultant's obligation and identified under the tax identification number (Social Security Number) indicated.

CONSULTANT:

Typed Name

Signature

Social Security Number

Date

Mailing Address

Telephone Number

COMMISSIONER OF HIGHER EDUCATION:

E. Joseph Savoie

Signature