

**All invoices must be on company letterhead. See required information below.
Do not submit this sample copy.**

Name of Approved Trainer or Employment Support Services Provider (or Letterhead)

INVOICE

Street Address
 City, BC Postal Code
 Phone: Enter phone
 Email: Enter email of main contact

INVOICE #
 DATE:

TO:

FOR:

CWRG Agreement Holder

Organization Name

Street Address

City, B.C. Postal Code

Name of Contact at Organization

Project or service description

| DESCRIPTION | \$ AMOUNT |
|---|----------------------------|
| Itemized description of SkillsTraining or Employment Support Services (ESS) provided; start date of training, service or support. <i>e.g. "Course/Program Name" Skill Training for 8 participants beginning Month, Day, Year</i> <i>e.g. "ESS Program Name" Employment Support Services (ESS) for 8 participants beginning Month, Day, Year</i> | \$X.XX |
| Student Name 1 <i>e.g. Names of students who received/will receive services</i> Student Name 2 Student Name 3 Student Name 4 Student Name 5 Student Name 6 Student Name 7 Student Name 8 (continue with student names) | \$X.XX |
| TOTAL: GST / TAX (if applicable) TOTAL INVOICE AMOUNT: | \$X.XX \$X.XX \$X.XX |

Note: Invoice(s) should be submitted to the Agreement Holder within 10 days from the start of training.

When a Third-Party delivers a component of the Project, within 30 days of receiving funds from the Province the CWRG Agreement Holder must provide proof the invoice(s) used to make the claim has/have been paid in full.

CWRG requirements for proof of payment are the following:

1. A copy of the front and back of a cleared cheque **OR**
2. A bank statement showing funds were transferred to the training provider(s) **OR**
3. A payment receipt indicating the recipient and dollar amount paid.

