Universal Billing Form

Reset Form | Submit by E-mail

Form Updated 3.20.12

Date:	
Service Provided: (if multiple services provided, please use separate billing forms)	
Service Provider:	
School District:	
School Site:	
Student Name:	

FM Rentals

September	☐	**March**	☐
October	☐	**April**	☐
November	☐	**May**	☐
December	☐	**June**	☐
January	☐	**July**	☐
February	☐	**August**	☐

Date	Service Provided	Service Summary	Evaluation/Consult (Minutes)

Total Hours	

THIS SECTION - OFFICE USE ONLY

Date Rcd: Initials: SA

Reference Number: Invoice #:

Are the contracted hours completed?

Total Hours of Service Provided

	Hours	Hourly Cost	Subtotal
Select One			
FM Rental $50/mo (enter # months in hours box)		$ 50.00	
Online Charter School Administrative Fee (enter # of students in Hours box)		$ 85.00	
TOTAL COST OF SERVICES			

I have verified these services and authorize billing to be processed.

Program Administrator **Date**