

**\*\*You must fill in all highlighted areas with your info and attach receipts from project\*\***

**Your Business letterhead**

Your Business Address

Your Business Contact Information

**INVOICE - 2021-1**

Date

To: Pickaway County Park District  
458 Lancaster Pike  
Circleville, Ohio 43113

**Service(s) Rendered:**

**Total Cost**

\* These amounts should match you budget sheet from your application

Description of Purchase ..... \$ Amount  
Description of Purchase ..... \$ Amount



**Total Project Cost.....\$ Amount**



\*This Total Should Equal your 10% match (if Applicable)

**Total Grant Reimbursement Request.....\$ Amount**



This Total Should Equal your awarded Grant amount

\*Receipts Attached

Signature of Fiscal Officer

Date