

UNIVERSITY SCIENCE FAIR

College of Science & Engineering
123 University Ave, Lab Suite 4
City, State, Zip Code

INVOICE

Invoice #: _____
Date: _____

BILL TO:

Organization Name: _____
Contact Person: _____
Address: _____
Email: _____

PAYMENT TERMS:

Due Date: _____
Event Date: _____
Tax ID: _____

Sponsorship Level / Description	Qty	Unit Price	Total
_____	_____	\$_____	\$_____
_____	_____	\$_____	\$_____

Subtotal: \$ _____
Total: \$ _____

PAYMENT INSTRUCTIONS:

Please make checks payable to: **[University Name - Science Fair]**

For Electronic Fund Transfer (EFT):

Bank: _____ | Account: _____ | Routing: _____

Thank you for supporting the next generation of scientific innovation.

Questions? Contact the Science Fair Committee at (555) 012-3456 or sciencefair@university.edu