

Subawardee Invoice

Subawardee Name Subaward Number Issue Date Federal ID No. (If no FEIN, use UEI)	Subawardee Address
Invoice Number	Is this the Final Invoice? Yes No
Billed to: University of Maryland, College Park Accounts Payable Office Chesapeake Building, Room 3101 College Park, Maryland 20742-3142	
Email: apadmin@umd.edu Phone: 301-405-2640	
Total Period of Performance Start Date End Date Current Billing Period Start Date End Date	(U.S. Dollars only) Cumulative Costs to Date (including this period)
Major Cost Category Personnel Salary and Wages Fringe Benefits (if charged as direct cost) Equipment (>\$5000 per item) Travel Material and Supplies Consultant Services Commercial Contractor Services Subaward Payments Other Direct Costs	(U.S. Dollars only) Current Period Costs
Direct Cost Subtotal Indirect Costs Total Cost	
Costs previously invoiced Cost Share (this period)	Please remit this amount Total Cost Share to Date
Wire Transfer (Foreign Recipients Only) Bank Name Street Address Bank Account Name IBAN Account Number SWIFT Code Account Type Contact Name Phone Number	
[Certification Must Appear on All Invoices] By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)	
Authorized Accountant Signature Name (print)	Date Signed