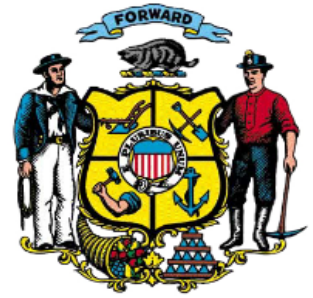


**Please Remit To:**  
 WI Department of Transportation  
 DBM BBS FISCAL SERVICES  
 PO BOX 7366  
 Madison WI 53707-7366



INVOICE  
 State of Wisconsin  
 WI Dept of Transportation

**Bill To:**  
 Wisconsin County  
 Jennifer Sample  
 1234 ABC Street, Room 151  
 Grand City WI 5XXXX-0100

**Invoice No:** 395-00000XXXX  
**Invoice Date:** 6/6/2018  
**Page:** 1 of 1

**Project ID:** 395XXXXXXXXX  
**Project Title:** MUNI-NAME, BEST ROAD  
**Customer Number:** MUNI000XXX  
**Payment Terms:** NET30  
**Due Date:** 7/6/2018  
  
**AMOUNT DUE:** \$ 31,109.57 USD

For billing questions, please call: 608-245-5347

Project Title	Source Activity	Billing Period	Net Amount
MUNI-NAME, BEST ROAD	0010ROADWAYITEM	5/8/2018 to 5/24/2018	\$ 24,496.64
MUNI-NAME, BEST ROAD	0020STRUCTURE/B	5/8/2018 to 5/8/2018	\$ 3,175.65
MUNI-NAME, BEST ROAD	LABOR-DLVY-OTHR	5/1/2018 to 5/25/2018	\$ 3,437.28

END OF INVOICE

**Please Remit To:**  
 WI Department of Transportation  
 DBM BBS FISCAL SERVICES  
 PO BOX 7366  
 Madison WI 53707-7366

**Amount Due:** \$ 31,109.57  
**Due Date:** 7/6/2018

**Bill To:**  
 Wisconsin County  
 Jennifer Sample  
 1234 ABC Street Rm 151  
 Grand City WI 5XXXX-0100

**Invoice No:** 395-00000XXXX  
**Invoice Date:** 6/6/2018  
**Project ID:** 39556710076  
**Project Title:** MUNI-NAME, BEST ROAD  
**Customer Number:** MUNI000XXX

**Amount Remitted**