

## VENDOR INVOICE FORM

**Instructions:**

1. The deadline on the CA SDP Payment Schedule determines when payments are made for submitted vendor invoices. Avoid putting dates on this form that apply to more than one invoice deadline. Complete a new Vendor Invoice Form for invoicing that applies to other invoice deadlines. If more space is needed for a single invoice deadline, use more Vendor Invoice Forms as needed. The Employer must review, approve and sign the invoice. The Employer is the Participant, or a person who is legally responsible for the Participant.
2. Submit this Vendor Invoice Form to Public Partnerships LLC (PPL).

### Participant and Vendor Details

<b>Participant First Name:</b>	<b>Participant Last Name:</b>	<b>PPL ID:</b>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<b>Vendor Name:</b>	<b>Vendor PPL ID:</b>	<b>Vendor Phone #:</b>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<b>Vendor Payment Address:</b>		
<input style="width: 95%;" type="text"/>		

### Service Details

Service Code	Date	Description of Service Performed	Time Spent on Service or Task	Rate	Cost
<b>Total:</b>					

I verify that I have performed the service as listed.

**Vendor Representative Signature:**

**Date:**

**Employer Signature:**

**Date:**

**IMPORTANT:** If all fields above are not completed you will be notified. You will need to submit a corrected invoice. All fields must be present for payment.

Return the completed Vendor Invoice Form to PPL:

- By email at: [PPLCASDP@pplfirst.com](mailto:PPLCASDP@pplfirst.com)
- By fax at: (833) 571-4908, or
- By mail at: Public Partnerships LLC  
3111 Camino Del Rio North  
Suite 400  
San Diego CA 92108