

A	C	D	E	F	G	H	I	
Subaward ID	EGMS ID	GL Total	P&L Total	C-D	Not Billed	Net (C-F)	Round (I-G)	FR Total
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
				\$ -		\$0.00	\$ -	
Total		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ -	\$0.00

Month

Jul-23

Comments

Check List	Status	Order	Commen
Invoice Name	Yes	1	
Executed Contract	Yes	2	
check for Amendment	Yes	3	
Prior Months Rec	Yes	4	
TB Compared and uploaded	Yes	5	
Set updated		6	
Billing & YTD reviewed	Yes	7	
GL Budget Lines Check	Yes	8	
Reimbursement Certified		9	
Expenses Checked		10	
Invoice Summary added	Yes	11	
Worksheet uploaded	Yes	12	
Loccsdraw and set uploaded		13	
LCCSdraw emailed		14	

Invoice Summary

GL Total	\$ 0.00
Not Billed	\$ 0.00
Rounding	\$ 0.00
FR Total	\$ 0.00
Disallowed	\$ 0.00
Adj Total	\$ 0.00

Cash Advance Recapture

FR Total	\$ 0.00
Recapture	\$ 0.00
Adj FR	\$ 0.00

Invoice Summary

GL Total	\$ 0.00
Previously Billed	\$
Net Not Billed	\$ 0.00
Rounding	\$ 0.00
FR Total	\$ 0.00