



CITY OF CULVER CITY

FINANCE DEPARTMENT

9770 Culver Blvd., Culver City, CA 90232

accounts.receivable@culvercity.org

Phone: (310) 253 5890

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INVOICE INFORMATION FORM

Customer No.:

Billing Information

Legal Name Of Business:		
Business Name (or DBA):		
Service Address:		
City:	State:	Zip:
Billing Address:		
City:	State:	Zip:
Phone:	Fax:	
Email:		
Federal Tax ID Or Social Security Number:		

Contact Person for Billing/Payment Information

Name:	Title:	Phone:
Email:		
Address:		
City:	State:	Zip:
Invoice Term (30 Days, Quarterly, Yearly)	GL Number	Amount
Requested By	Name & Title	Date
CITY USE ONLY	Received By:	Received on: