



ODHS Fee for Service Contract Invoice

CF0846
(05/10/2021)

Payee information

Payee number: 1155863
Payee name: Dynamic Life
Payee address: 7554 Kayla Shae St NE Keizer, OR 97303
(Street, City, State, ZIP)

Payee contact: Rylee Webber
Contact email: rylee@dynamiclifepnw.org
Contact phone: 503 602 2044

Invoice number: SN April 23
DHS Branch | County: Albany | Linn
Billing month/year: April 2023

Validated Amount **\$83,333.33**

Rylee Webber

4/1/2023

Payee Electronic Signature

Date

Payee Invoice comments (if needed):

Total Invoice **\$83,333.33**

Example comment: This invoice was submitted to Newport and Coos Bay branches for approval.

Line #	Contract Number	Case Number	Participant Number	Participant Last Name	Participant First Name	Service Category	Service Type	Service Start Date	Service End Date	Rate Per Unit	Number of Units	Invoiced Amount	Service Outcome	OFS Only
1	178164					Counseling & Therapeutic	Coaching- Youth & Fam	4/1/2023	4/31/2023	\$83,333.33	1	\$83,333.33	N/A	
1	Payee Notes: <u>Super Nanny Grant</u>			Branch/Office:		DHS Notes:		Payment ID: <u>16640863</u>			Validation code: OP		Paid 5/1/2023 KS	