Oregon Department of Human Services

ODHS Fee for Service Contract Invoice

CF0846 (10/2022)

Payee Information

Payee number:	1155863	Payee contact:	Rylee Webber	Invoice number:	SN-Sept 23
Payee name:	Dynamic Life Inc	Contact email:	rylee@dynamiclifepnw.org	ODHS Branch | County:	Albany | Linn
Payee address:	7554 Kayla Shae St NE Keizer, OR 97303	Contact phone:	503 602 2044	Billing month/year:	September 2023
	(Street, City, State, ZIP)				

Validated Amount $83,333.33

Rylee Webber 10/1/2023

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	9/1/2023	9/30/2023	$83,333.33	1	$83,333.33	N/A	Paid
1	Payee Notes:			Branch/Office: Albany		ODHS Notes:			Payment ID: 16905382			Validation Code:	OP	