

- J. Contractor's name and address
- K. Contractor's remittance address, if different from (A), above
- L. Name of County agency/department
- M. Delivery/service address
- N. Contract number
- O. Service Date
- P. Description of Services
- Q. Total
- R. Taxpayer ID number

Invoices and support documentation are to be forwarded to:

OC Public Works/OC Facilities Operations
Attn: Jennifer Carroll
1143 East Fruit Street
Santa Ana, Ca 92701-4204