

**PERSONAL ASSISTANCE FUND
INVOICE FOR ICL APPROVED FINANCIAL PACKAGE**

Service user name and surname:	
Date:	
Month covered by Invoice:	

Personal Assistant-related expenses (ALL EXPENSES ARE TO BE SUBSTANTIATED BY A LEGAL DOCUMENT)	Amount (€)	Document (✓)
Personal Assistant wage		
SUB-TOTAL		

Service user's other expenses (ALL EXPENSES ARE TO BE SUBSTANTIATED BY A LEGAL DOCUMENT)	Amount (€)	Document (✓)
SUB-TOTAL		

GLOBAL AMOUNT BEING INVOICED	
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Service user's signature: _____