

Invoice Review & Approval

A 3D puzzle graphic with several pieces missing, set against a dark blue background with glowing blue lines. The puzzle pieces are light blue and white, and the missing pieces are highlighted in a darker blue. The puzzle is tilted and appears to be floating in the air.

Kyle Kilga (Ecology & Environment, Inc.)

Petroleum Cleanup Section 2

850-245-8855

Kyle.kilga@dep.state.fl.us

I have an Invoice ...What do I do?

- Original Invoice (no faxed copies)
- Date Stamp – received by BPSS Accounting or LP
- Priority
 - 5 Day Turnaround Time (includes FDEP Manager & CC Administrator)
- Verify the Work
 - Deliverable received?
 - All Template items completed as scoped

FDEP Contract No.: <u>N/A</u>		Invoice No.: <u>123456789</u>		Work Order No.: <u>2006-96-W12000</u>	Contractor No.: <u>00222</u>	Invoice Date: <u>10/30/06</u>	Period of Service: <u>5/22/06 to 3/30/07</u>
Site Name: <u>Infamous Site #123</u>						FAC.ID: <u>448521378</u>	

Vendor FEID No. 16-0971022 Telephone: <u>103-456-7890</u> Agent: <u>JOE ACCOUNTANT</u>	Remit Payment To: <u>BEST CONTRACTOR</u> <u>405 CONSULTING AVE.</u> <u>TALLAHASSEE, FL 32301</u>	Bill To: Florida Department of Environmental Protection Bureau of Petroleum Storage Systems 2600 Blair Stone Road, M.S. 4575 Tallahassee, Florida 32399-2400 Attn: BPSS Accounting
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Contractor Use:							
This Invoice (y/p/-)	(1) Invoice	(2) Original Amount	(3) Change Amount*	(4) New Total	(5) Previously Invoiced	(6) Due This Invoice	(7) Balance
1 ☒	1st Event	\$13,239.17	\$1,550.05	\$14,789.23	\$0.00	\$14,789.23	\$0.00
2 ☒	2nd Event	\$17,678.99	(\$4,013.72)	\$13,665.27	\$0.00	\$13,665.27	\$0.00
3 ☒	3rd Event	\$0.00	\$3,500.52	\$3,500.52	\$0.00	\$3,500.52	\$0.00
4 ☐	4th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 ☐	5th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6 ☐	6th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 ☐	Remedial Systems	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 ☒	Final Deliverable	\$5,277.27	\$618.32	\$5,895.60	\$0.00	\$5,895.60	\$0.00
9 ☒	Retainage	\$4,021.72	\$183.91	\$4,205.62	\$0.00	\$4,205.62	\$0.00
Total		\$40,217.15	\$1,839.09	\$42,056.24	\$0.00	\$42,056.24	\$0.00

* IMPORTANT: All changes must be requested at time of invoicing and must be accompanied by full description and backup.

Change in the period of service: _____ New Period of Service End Date extended to: _____

Requested by Contractor Representative: JOHN DOE John Doe Date: 10/30/06

Approved by FDEP/LP Site Manager: _____ (Print Name) _____ (Signature)

Fixed Price: Work Order Amount (col 4) <u>\$42,056.24</u> Previously Invoiced Amount (col 5) <u>\$0.00</u> Invoice Total (col 6) <u>\$42,056.24</u> Balance Remaining (col 7) <u>\$0.00</u>	FDEP Use Only: Cost Center # <u>37450404555</u> Module <u>4773</u> Object <u>139900</u> Category <u>087888 FY 05-06</u> EO <u>UP</u>
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FDEP/LP Use Only: Bureau of Petroleum Storage Systems NOV 03 2006 Petroleum Cleanup Section #2	1. Date Invoice Received 2. Date(s) Services Rendered 3. Date Services Approved 4. Performance Certified Satisfactory 5. Approval _____ 6. Approval _____ 7. Final Invoice: YES NO
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Verify Tasked Work Was Completed

Section C: Field Activities

1 Mobilization (2 persons)	\$757.65	2	\$1,515.30		\$0.00	\$1,515.30
2 Mobilization (1 person)	\$407.61		\$0.00		\$0.00	\$0.00
3 Drilling Setup (w/utility clearance)	\$528.87	1	\$528.87		\$0.00	\$528.87
4 SB for Soil Screening or Piezometer Install (≤ 10 ft)	\$221.16		\$0.00		\$0.00	\$0.00
5 SB for Soil Screening or Piezometer Install (> 10 ft to ≤ 30 ft)	\$331.73		\$0.00	2	\$663.46	\$663.46
6 SB for Soil Screening or Piezometer Install (> 30 ft)	\$442.31		\$0.00		\$0.00	\$0.00
7 Well Install (≤ 20 ft)	\$452.55		\$0.00	5	\$2,262.75	\$2,262.75
8 Well Install (> 20 ft to ≤ 40 ft)	\$678.82	5	\$3,394.10	(5)	(\$3,394.10)	\$0.00
9 Well Install (> 40 ft)			\$0.00		\$0.00	\$0.00
10 Well Install, double cased (≤ 40 ft)	\$1,357.64	2	\$2,715.28	(1)	(\$1,357.64)	\$1,357.64
11 Well Install, multiple cased (> 40 ft)			\$0.00		\$0.00	\$0.00
12 Recovery Well Install (≤ 40 ft)	\$905.10		\$0.00		\$0.00	\$0.00
13 Recovery Well Install (> 40 ft)			\$0.00		\$0.00	\$0.00
14 Air Sparging Well Install (≤ 40 ft)	\$339.41		\$0.00		\$0.00	\$0.00
15 Soil VE Well Install (≤ 40 ft)	\$226.27		\$0.00		\$0.00	\$0.00
16 AS and/or VE Well Install (> 40 ft)			\$0.00		\$0.00	\$0.00
17 Well or Piezometer Abandonment (each)	\$80.07		\$0.00		\$0.00	\$0.00
18 Recovery Well Abandonment (per well)	\$227.29		\$0.00		\$0.00	\$0.00
19 Well Sampling (per well)	\$225.92	7	\$1,581.44	(1)	(\$225.92)	\$1,355.52
20 Water Level Only or Free Product Gauging (per well)	\$22.97	10	\$229.70	(4)	(\$91.88)	\$137.82
21 Free Product Gauging & Bailing (per well)	\$108.52		\$0.00		\$0.00	\$0.00
22 Area Survey	\$905.10		\$0.00		\$0.00	\$0.00
Section C Subtotals:			\$9,964.69		(\$2,143.33)	\$7,821.36

Section D: Other Field Work

1 Other Field Work	Energy Adj.	\$419.64	\$419.64	(\$98.00)	(\$98.00)	\$321.64
2 Other Field Work			\$0.00		\$0.00	\$0.00
Section D Subtotals:			\$419.64		(\$98.00)	\$321.64

Section G: Subcontractor Cost(s)

Sub Markup = 10.00%

	Unit Cost	# Units		Do not include markup		
1 Laboratory (from worksheet)	\$817.27	1	\$899.00	(\$56.69)	(\$62.36)	\$836.64
2 Laboratory			\$0.00		\$0.00	\$0.00
3 Mobile Lab			\$0.00		\$0.00	\$0.00
4 Drilling	\$6,800.00		\$7,480.00	(\$1,800.00)	(\$1,980.00)	\$5,500.00
5 Direct Push			\$0.00		\$0.00	\$0.00
6 Construction			\$0.00		\$0.00	\$0.00
7 Non-Capital Equip. and/or Materials			\$0.00		\$0.00	\$0.00
8 Remedial Equip./System Lease			\$0.00		\$0.00	\$0.00
9 Disposal	\$80.00	10	\$880.00	(\$160.00)	(\$176.00)	\$704.00
10 Other			\$0.00		\$0.00	\$0.00
Section G Subtotals:			\$9,259.00		(\$2,218.36)	\$7,040.64

Depth &
of MWs
& SBs

Calculate
Energy
Adjustment

Analytical Adj.
per Sampling
Table

Sub. Adj. per
unit rates in
quote.

VCOs

- Required for:
 - All unit and cost increases
 - Change of subcontractor
 - Deliverable extension
 - If Final Deliverable check Period of Service
- Approved and Completely Signed
- Legible
- Event Indicated

Verbal Authorization for Change in Scope of Work

FDEP Work Order # 2006-96-W12000 FACID #: 448521378 Site Manager: Sally Smith
 Contractor Name: Best Contractor Contractor Phone #: 123-456-7890
 Site Name and Address: Infamous Site #123, Corner of Main St. & Pride Ave., Key West

This is an authorization for the costs associated with the scope of work listed below. In order for these costs to be paid, these changes will need to be incorporated into the applicable change order/invoice for the referenced work order or task assignment (including copies of all applicable subcontractor & materials invoices).

Description of Change: 1st Field Event

Add an additional day of DPT to perform step-out borings at 10 ft intervals to delineate the horizontal extent of soil contamination. Continuous soil screening to 2 ft into the water table.

Field Work	Section & Number	Template Activity Description	Cost per Item	# of Items	Authorized Costs
X	C-24	Whole Day Oversight (total days x number of people)	\$835.72	2	\$1,671.44
X	C-25	Kit Allowance (number of days) (no per diem included)	\$319.66	1	\$319.66
X	C-26	Per Diem (total days x number of people)	\$110.23	2	\$220.46
	D-1	Energy Adjustment	\$44.23	1	\$44.23
n/a	H-1	General / SA Report Preparation Costs ¹	n/a	1	\$552.89
subtotal:					\$2,808.68

¹ actual amount will be determined in template cost sheet during invoicing

Subcontractor/Equip. Purchase	Authorized Costs	In-house Services/Equip. Rental	Authorized Costs
Laboratory []	\$0.00		
Super DPT Co.	\$1,600.00		
subtotal (with 10% markup):		\$1,760.00	subtotal (no markup):

Field Work	Labor Category	"Bare" Labor Rates	Labor Hours	Authorized Costs	Misc. Expenses	Authorized Costs
					Equipment:	
					Materials:	
					Other:	
					[]	
	Equipment Kit Costs:	\$0.00				
subtotal*:				subtotal:		

(* includes all markups & equipment kit costs)

Deliverable(s)	Previous Due Date(s)	New Due Date(s)	FDEP Cost Share
1st: 1st Event Interim Report	6/1/2006	6/15/2006	100%
2nd:			
3rd:			
4th:			
5th:			
Final:			

Total Authorized Costs \$4,568.68

Period of Service extended to: _____

Requested by Contractor Representative: John Doe (Print Name) John Doe (Signature) Date: 6/1/06
 Authorized by FDEP Site Manager: Sally Smith (Print Name) Sally Smith (Signature) Date: 6/1/06
 Accepted Contractor Representative: John Doe (Print Name) John Doe (Signature) Date: 6/1/06



Subcontractor/Vendor Invoices

- Subcontractor Invoices are NOT required for Fixed Price Schedule items (i.e. Lab & Drilling).
- All Change Order Invoices must be accompanied by complete backup of the actual costs incurred if the unit costs applicable to the change in scope are not included in the original quote and/or Fixed Cost Template.

Invoice Checklist

FDEP/BPSS Preapproval Invoice Checklist Multi-Event Template Format

(For Work Orders Executed After Effective Date of 2005 SOP Changes)

All invoices **MUST** first be date stamped by the section or Local Program. Tallahassee sections immediately route the invoice package to the BPSS Accounting Section for log in to the tracking database and, upon its return to the section, are routed to the Site Manager for processing. Local Programs proceed with processing of the invoice after its initial receipt and then route the invoice package to Section Two for any necessary QA or approval prior to routing to the BPSS Accounting Section. All invoices should be processed and returned to the BPSS Accounting Section within **FIVE (5)** working days from the date of receipt. The information on the "Preapproval Services Change Order & Invoice" must be verified from the Workbook and any necessary subcontractor invoices. The Workbook consists of the Work Order (W.O.), Event Templates, Lab Sheet and Backup Spreadsheet (if applicable). This invoice is electronically generated from the Workbook and linked with formulas in the templates. Therefore, event templates cannot be deleted in the Workbook.

- ___ 1. **Original Invoice:** **MUST** have the FDEP or Local Program (LP) date stamped on the front of the original invoice (**not on the cover letter**) to show the actual date that it was received from the Contractor.
- ___ 2. **FDEP Contract No.:** If applicable. (i.e. PUC-001 for the Handex of Florida Contract). If non-applicable write N/A.
- ___ 3. **Invoice No.:** Each invoice must have an invoice number from the Contractor. [Nine (9) maximum digits and no front zero's (0) per FDEP F&A]
- ___ 4. **Work Order No.:** 11 digits - example: 2001-01-0001-0 (if changes are made in the current invoice or were made in a previous invoice, there is no need to correct the 0 to match the change order).
- ___ 5. **Contractor No.:** Must match CID # (5 digits) on the W.O.
- ___ 6. **Invoice Date:** This is supplied by the Contractor.
- ___ 7. **Period of Service:** The beginning date cannot be prior to the last signature date on the W.O. page. The end date is located in the center of the W.O. page as - "Period of Service: Contractor Representative Signature Date To _____."
- ___ 8. **Site Name, City, and County:** This information needs to match the W.O. page.
- ___ 9. **Facility ID No.:** All 9 digits of the facility registration number need to match the Workbook.
- ___ 10. **Vendor:** Name and mailing address for FDEP F&A to send the check.
- ___ 11. **FEID No.:** Must match the FEID No. on the W.O. page.
- ___ 12. **Telephone:** Contractor's area code and telephone number.
- ___ 13. **Agent:** Contractor's representative. (An alternate contact should be included for invoice specific questions.)
- ___ 14. **Invoice:** Column (1) - Event Box should be marked to indicate the template event(s) being invoiced.
- ___ 15. **Original Amount:** Column (2) - Use the "This Event Template Invoice Totals (Original)" for each of the template events in the Workbook to verify the amount(s).
- ___ 16. **Change Amount:** Column (3) - Use the "This Event Template Invoice Totals (Change)" for each of the template events that have changed in the Workbook to verify the amounts.
- ___ 17. **New Total:** Column (4) - Verify that the amounts in Column (2) plus Column (3) equal Column (4). Use the "This Event Template Invoice Totals (Total)" for each of the template events that have changed to verify new amounts.
- ___ 18. **Previously Invoiced:** Column (5) - Site Manager should verify that he/she has a copy of the previous invoice and all amounts are correct on the present invoice.
- ___ 19. **Due This Invoice:** Column (6) - Amount invoiced must be the **Full Amount (NO PARTIAL PAYMENTS)**.

FDEP/BPSS Preapproval Invoice Checklist Multi-Event Template Format

(For Work Orders Executed After Effective Date of 2005 SOP Changes)

The Contractor places an "X" in the box for the individual events 1-6, remedial systems, final deliverable and/or retainage from the Workbook. *Note for LP's - All Final Invoices **MUST** be approved by FDEP (leave line 6 for FDEP signature).*

- ___ 20. **Balance:** Column (7) - Any funds from the W.O. Total that remain to be invoiced. *Note for LP's - if there is **NOT** a balance, **do not** fully process the invoice. Send it to FDEP for final approval on signature line 6.*
- ___ 21. **Change in the period of service:** "New Period of Service End Date extended to: _____." If any activity needs to be performed past the end of the period of service, an extension of the period of service is required. The new date must be listed on the invoice in the blank provided. The invoice **must** also be signed by the Site Manager and Contractor in the section below the date. The extension of the period of service date can be authorized through a Verbal Change Order (VCO), but the invoice must still reflect the date change and the signatures.
- ___ 22. **Requested by Contractor Representative:** The Contractor **MUST** print their name, sign their name and date this request for change if any cost reduction and/or increase has occurred in the current amount that is being invoiced or in the period of service.
- ___ 23. **Approved by FDEP/LP Site Manager:** The Site Manager **MUST** print their name, sign their name and date this request for change if any cost reduction and/or increase has occurred in the current amount that is being invoiced or in the period of service.
- ___ 24. **Fixed Price Section:** The following items must match what is shown in the above listed columns. If any corrections were made in the columns, these items will also need to be corrected and initialed:
 - ___ Work Order Amount - must match cost from column (4) - "New Total"
 - ___ Previously Invoiced Amount - must match cost from column (5) - "Previously Invoiced"
 - ___ Invoice Total - must match cost from column (6) - "Due This Invoice"
 - ___ Balance Remaining - must match cost from column (7) - "Balance"
- ___ 25. **FDEP Use Only (Block on Lower Right Side of Invoice Generated from WO - Example FY 04-05):**

For FY 2004-2005	
Cost Center #	37450404555
Module	4773
Object	139900
Category	087888-FY 04-05
EO	UP
- ___ 26. **FDEP/LP Use Only: [Bottom Section of the Invoice]:**
 - ___ **Date Invoice Received** - The date that the invoice was received by the Site Manager. *Note for LP's - The invoice **MUST** have a separate stamped date from the LP County.*
 - ___ **Date(s) Services Rendered** - (3 choices for the time range)
 - a. The dates the actual field work or office activity was performed.
 - b. The date from the last signature on the W.O. to the date the invoice was submitted, but it **CANNOT** extend past the end of the "Period of Service."
 - c. The date from the last signature on the W.O. to the date the acceptable deliverable was received.
 - ___ **Date Services Approved** - The date the Site Manager approves the invoice.
 - ___ **Performance Certified Satisfactory** - Signature of the Site Manager.
 - ___ **Approval DEP Mgr. Signature/Date** - FDEP Manager's (or LP Designee's) approval of the invoice.
 - ___ **Approval Cost Center Administrator Signature/Date** - The FDEP Cost Center Administrator's (or LP Designee's) approval of the invoice for payment. *Note for LP's - This does **NOT** apply to any LP PAC Invoice, these are signed at FDEP.*
 - ___ **Final Invoice** - Circle **NO** if it is not a final invoice.

Verify Key Fields to Work Order

INVOICE

Petroleum Preapproval Program Services Change Order & Invoice

FDEP Contract No.: N/A

Invoice No. 123456789

Work Order No. 2006-96-W12000

Contractor No. 00222

Invoice Date 10/30/06

Period of Service

5/22/06 to 3/30/07

Site Name: Infamous Site #123

FAC.ID 448521378

Vendor

Remit Payment To:

BEST CONTRACTOR
405 CONSULTING AVE.
TALLAHASSEE, FL 32301

Bill To:

Florida Department of Environmental Protection
Bureau of Petroleum Storage Systems
2600 Black Stone Road, M.S. 4575
Tallahassee, Florida 32399-2400

Attn: BPSS Accounting

FEID No. 16-0971022

Telephone: 123-456-7890

Agent: JOE ACCOUNTANT

WORK ORDER

Florida Department of Environmental Protection-Division of Waste Management-Bureau of Petroleum Storage Systems

Petroleum Preapproval Program Work Order

Work Order Number: 2006-96-W12000

Cost Center #: 37450404555

Category: 087888 FY 05-06

FDEP Facility ID#: 448521378

Score: 45

Contract #: N/A

Site Name: Infamous Site #123

Eligibility: Priority Score

Address (Street, City): Corner of Main St. & Pride Ave., Key West

County: Monroe

Contractor Name: Best Contractor

CID #: 00222

Contractor Address: 405 Consulting Ave., Tallahassee

FEID #: 16-0971022

Contractor Representative: John Doe

Phone #: 123-456-7890

FDEP Site Manager: Sally Smith

Phone #: 900-222-444

INVOICE

Petroleum Preapproval Program Services Change Order & Invoice

FDEP Contract No.:	N/A				
Invoice No.	Work Order No.	Contractor No.	Invoice Date	Period of Service	
123456789	2006-96-W12000	00222	10/30/06	5/22/06	to 3/30/07
Site Name: Infamous Site #123			FAC.ID	448521378	
Vendor		Remit Payment To:		Bill To:	

Change in the period of service:

New Period of Service End Date extended to: _____

Requested by Contractor Representative:

JOHN DOE

(Print Name)

John Doe

(Signature)

Date: 10/30/06

Approved by FDEP/LP Site Manager:

SALLY SMITH

(Print Name)

Sally Smith

(Signature)

Date: 11/3/06

INVOICE

Final Deliv.: General / SA Report

Final Due Date: 10/01/2006

Period of Service:

Contractor Representative Signature Date

To

March 30, 2007

Amount (incl. retainage):

\$40,217.15

Retainage (10%):

\$4,021.72

This WORK ORDER is not in effect until signed by all parties. The FDEP will not pay any amount of this WORK ORDER until the original signed copy has been returned to the FDEP. The FDEP will not pay for any portion of the scope of work that has not been performed as of the date of the invoice.

WORK ORDER

-- Additional Terms And Conditions On Following Pages --

FDEP Site Manager:

Sally Smith

Date
05/11/2006

FDEP Manager:

[Signature]

5/12/06

Cost Center Administrator:

[Signature]

5/12/06

Contractor Representative:

John Doe

5/22/06

Contractor Representative:



Invoice Checklist

- ___ 14. **Invoice:** Column (1) - Event Box should be marked to indicate the template event(s) being invoiced.
- ___ 15. **Original Amount:** Column (2) - Use the “This Event Template Invoice Totals (Original)” for each of the template events in the Workbook to verify the amount(s).
- ___ 16. **Change Amount:** Column (3) - Use the “This Event Template Invoice Totals (Change)” for each of the template events that have changed in the Workbook to verify the amounts.
- ___ 17. **New Total:** Column (4) - Verify that the amounts in Column (2) plus Column (3) equal Column (4).
Use the “This Event Template Invoice Totals (Total)” for each of the template events that have changed to verify new amounts.
- ___ 18. **Previously Invoiced:** Column (5) - Site Manager should verify that he/she has a copy of the previous invoice and all amounts are correct on the present invoice.
- ___ 19. **Due This Invoice:** Column (6) - Amount invoiced must be the Full Amount (**NO PARTIAL PAYMENTS**).

Checklist

This Invoice (y/p/-)	(1) Invoice	(2) Original Amount	(3) Change Amount*	(4) New Total	(5) Previously Invoiced	(6) Due This Invoice	(7) Balance
	INVOICE						
1 ☒	1st Event	\$13,239.17	\$1,550.05	\$14,789.23	\$0.00	\$14,789.23	\$0.00
2 ☒	2nd Event	\$17,678.99	(\$4,013.72)	\$13,665.27	\$0.00	\$13,665.27	\$0.00
3 ☒	3rd Event	\$0.00	\$3,500.52	\$3,500.52	\$0.00	\$3,500.52	\$0.00
4 ☐	4th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 ☐	5th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6 ☐	6th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 ☐	Remedial Systems	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 ☒	Final Deliverable	\$5,277.27	\$618.32	\$5,895.60	\$0.00	\$5,895.60	\$0.00
9 ☒	Retainage	\$4,021.72	\$183.91	\$4,205.62	\$0.00	\$4,205.62	\$0.00
	Total	\$40,217.15	\$1,839.09	\$42,056.24	\$0.00	\$42,056.24	\$0.00

Cumulative Work Order Totals (less Retainage)				Original Template Event 1 This Event Template Invoice Totals (less Retainage)			
Invoice	Previous	This Event	Total	Invoice	Original	Change	Total
# 1-6 Events	n/a	\$13,239.17	\$13,239.17	# 1 1st Event	\$13,239.17	\$0.00	\$13,239.17
# 7 Remedial Systems	n/a	\$0.00	\$0.00	# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	n/a	\$2,940.80	\$2,940.80	# 8 Final Deliverable	\$2,940.80	\$0.00	\$2,940.80
# 9 Retainage	n/a	\$1,797.77	\$1,797.77	# 9 Retainage	\$1,797.77	\$0.00	\$1,797.77
Work Order Total		\$17,977.75	\$17,977.75	Event Template Total	\$17,977.75	\$0.00	\$17,977.75

Cumulative Work Order Totals (less Retainage)				Original Template Event 2 This Event Template Invoice Totals (less Retainage)			
Invoice	Previous	This Event	Total	Invoice	Original	Change	Total
# 1-6 Events	\$13,239.17	\$17,678.99	\$30,918.17	# 2 2nd Event	\$17,678.99	\$0.00	\$17,678.99
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00	# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$2,940.80	\$2,336.47	\$5,277.27	# 8 Final Deliverable	\$2,336.47	\$0.00	\$2,336.47
# 9 Retainage	\$1,797.77	\$2,223.94	\$4,021.72	# 9 Retainage	\$2,223.94	\$0.00	\$2,223.94
Work Order Total	\$17,977.75	\$22,239.41	\$40,217.15	Event Template Total	\$22,239.41	\$0.00	\$22,239.41

Contractor Use:

This Invoice (y/p/-)	(1) Invoice	(2) Original Amount	(3) Change Amount*	(4) New Total	(5) Previously Invoiced	(6) Due This Invoice	(7) Balance
1 ☒ y	1st Event	\$13,239.17	\$1,550.05	\$14,789.23	\$0.00	\$14,789.23	\$0.00
2 ☒ y	2nd Event	\$17,678.99	(\$4,013.72)	\$13,665.27	\$0.00	\$13,665.27	\$0.00
3 ☒ y	3rd Event	\$0.00	\$3,500.52	\$3,500.52	\$0.00	\$3,500.52	\$0.00
4 ☐	4th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 ☐	5th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6 ☐	6th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 ☐	Remedial Systems	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 ☒ y	Final Deliverable	\$5,277.27	\$618.32	\$5,895.60	\$0.00	\$5,895.60	\$0.00
9 ☒ y	Retainage	\$4,021.72	\$183.91	\$4,205.62	\$0.00	\$4,205.62	\$0.00
	Total	\$40,217.15	\$1,839.09	\$42,056.24	\$0.00	\$42,056.24	\$0.00

Cumulative Work Order Totals (less Retainage)

Invoice	Previous	This Event	Total
# 1-6 Events	n/a	\$14,789.23	\$14,789.23
# 7 Remedial Systems	n/a	\$0.00	\$0.00
# 8 Final Deliverable	n/a	\$3,236.15	\$3,236.15
# 9 Retainage	n/a	\$2,002.82	\$2,002.82
Work Order Total		\$20,028.20	\$20,028.20

Change
Template
Event 1

This Event Template Invoice Totals (less Retainage)

Invoice	Original	Change	Total
# 1 1st Event	\$13,239.17	\$1,550.05	\$14,789.23
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$2,940.80	\$295.35	\$3,236.15
# 9 Retainage	\$1,797.77	\$205.05	\$2,002.82
Event Template Total	\$17,977.75	\$2,050.45	\$20,028.20

Cumulative Work Order Totals (less Retainage)

Invoice	Previous	This Event	Total
# 1-6 Events	\$14,789.23	\$13,665.27	\$28,454.50
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$3,236.15	\$1,832.17	\$5,068.33
# 9 Retainage	\$2,002.82	\$1,721.94	\$3,724.76
Work Order Total	\$20,028.20	\$17,219.39	\$37,247.58

Change
Template
Event 2

This Event Template Invoice Totals (less Retainage)

Invoice	Original	Change	Total
# 2 2nd Event	\$17,678.99	(\$4,013.72)	\$13,665.27
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$2,336.47	(\$504.30)	\$1,832.17
# 9 Retainage	\$2,223.94	(\$502.00)	\$1,721.94
Event Template Total	\$22,239.41	(\$5,020.02)	\$17,219.39

Cumulative Work Order Totals (less Retainage)

Invoice	Previous	This Event	Total
# 1-6 Events	\$28,454.50	\$3,500.52	\$31,955.02
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$5,068.33	\$827.27	\$5,895.60
# 9 Retainage	\$3,724.76	\$480.87	\$4,205.62
Work Order Total	\$37,247.58	\$4,808.66	\$42,056.24

Change
Template
Event 3

This Event Template Invoice Totals (less Retainage)

Invoice	Original	Change	Total
# 3 3rd Event	\$0.00	\$3,500.52	\$3,500.52
# 7 Remedial Systems	\$0.00	\$0.00	\$0.00
# 8 Final Deliverable	\$0.00	\$827.27	\$827.27
# 9 Retainage	\$0.00	\$480.87	\$480.87
Event Template Total	\$0.00	\$4,808.66	\$4,808.66

Approval for Changes

Contractor Use:

This Invoice (y/p/-)	(1) Invoice	(2) Original Amount	(3) Change Amount*	(4) New Total	(5) Previously Invoiced	(6) Due This Invoice	(7) Balance
1 ☒ y	1st Event	\$13,239.17	\$1,550.05	\$14,789.23	\$0.00	\$14,789.23	\$0.00
2 ☒ y	2nd Event	\$17,678.99	(\$4,013.72)	\$13,665.27	\$0.00	\$13,665.27	\$0.00
3 ☒ y	3rd Event	\$0.00	\$3,500.52	\$3,500.52	\$0.00	\$3,500.52	\$0.00
4 ☐	4th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 ☐	5th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6 ☐	6th Event	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 ☐	Remedial Systems	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 ☒ y	Final Deliverable	\$5,277.27	\$618.32	\$5,895.60	\$0.00	\$5,895.60	\$0.00
9 ☒ y	Retainage	\$4,021.72	\$183.91	\$4,205.62	\$0.00	\$4,205.62	\$0.00
	Total	\$40,217.15	\$1,839.09	\$42,056.24	\$0.00	\$42,056.24	\$0.00

* IMPORTANT: All changes must be requested at time of invoicing and must be accompanied by full description and backup.

Change in the period of service:

New Period of Service End Date extended to: _____

Requested by Contractor Representative:

JOHN DOE
(Print Name)

John Doe
(Signature)

Date: 10/30/06

Approved by FDEP/LP Site Manager:

SALLY SMITH
(Print Name)

Sally Smith
(Signature)

Date: 11/3/06

Fixed Price:

Work Order Amount (col 4)
Previously Invoiced Amount (col 5)
Invoice Total (col 6)
Balance Remaining (col 7)

\$42,056.24
\$0.00
\$42,056.24
\$0.00

FDEP Use Only:

Cost Center #
Module
Object
Category
EO

37450404555
4773
139900
087888 FY 05-06
UP

26. FDEP/LP Use Only: [Bottom Section of the Invoice]:

Checklist

Date Invoice Received - The date that the invoice was received by the Site Manager.

*Note for LP's - The invoice **MUST** have a separate stamped date from the LP County.*

Date(s) Services Rendered - (3 choices for the time range)

a. The dates the actual field work or office activity was performed.

b. The date from the last signature on the W.O. to the date the invoice was submitted, but it **CANNOT** extend past the end of the "Period of Service."

c. The date from the last signature on the W.O. to the date the acceptable deliverable was received.

Date Services Approved - The date the Site Manager approves the invoice.

Performance Certified Satisfactory - Signature of the Site Manager.

1. Date Invoice Received

2. Date(s) Services Rendered

3. Date Services Approved

4. Performance Certified Satisfactory

5. Approval

6. Approval

7. Final Invoice:

YES

NO

FDEP/LP Site Manager Signature

FDEP Manager Signature

Cost Center Administrator Signature

Date

Date

INVOICE



Making Changes to an Invoice

- Single line through change (NO White-out)
- Initial each change
- Carry changes throughout invoice
- Attach clean copy of invoice from template for legibility
- Note contractor approval on invoice
 - Who; When; How (phone, email, etc.)



Stopping the Clock

- Draw “X” over date stamp (not directly on date)
- Write “Stop Clock” and date on stop clock
- Short reason why
- Prepare “Stop Clock Memo” and send to Judy Powell in accounting with copy of invoice page
- Once invoice is complete or correct...
 - New date stamp and write restart clock
- Complete invoice processing and approve



Returning Invoice to Contractor

- Prepare “Return Invoice” letter
- Mark “VOID” across invoice page and contractor affidavit form prior to mailing
- Send “certified mail, return receipt requested”
- cc: Judy Powell (attach copy of invoice page only)
- cc: File (scanning)

Contractor Invoice Sworn Affidavit & VCO / Subcontractor / Vendor / Summary Form

Part I. Contractor Affidavit

I, Joe President am the/a Executive President
(name of person appearing) (title of person appearing)

of Best Contractor and hereby certify:
(name of prime contractor)

1. That Best Contractor ("the prime contractor") entered into an
(name of company or person)
agreement with the Department to perform certain work under work order number: 2006-96-W12000
(work order number)

on the following real property identified as:

Property/Business Name: Infamous Site #123 FDEP Facility No.: 448521378

Site Address (street, city, county): Corner of Main St. & Pride Ave, Key West, Monroe Co.

Real Property Owner Name: Larry Landlord

2. That this Affidavit & Summary Form specifically applies to work completed under the above
referenced work order and this invoice number 123456789, dated 10/30/06 for the
following events (circle all that apply):

[Event Number(s) 1 2 3 4 5 6 Remedial System ☐ Final Deliverable ☐ Retainage ☐]

3. That this invoice (check one) Is (X) or Is Not () the final invoice for the work order.

order, except those claims that may be specifically exempted and set forth under the terms of the agreement. All exemptions claimed must be explained in detail, attached to this affidavit with reference to the work order number, and also highlighted in the invoice cover letter.

Joe President
(signature of authorized contractor representative)

Notarization of Signature of Contractor (required)

State of FLORIDA County/Parish of LEON
Sworn to and subscribed before me by JOE PRESIDENT this 28TH day of OCTOBER, 2006.
Personally known ☒ Produced Identification ☐ Type of ID: N/A
My Commission Expires: 12/17/08
Notary Public, State of: FL
Commission Number (if applicable): 00369813



KYLE S. KILGA
MY COMMISSION # DD 369813
EXPIRES: December 17, 2008
Bonded Thru Budget Notary Services

Contractor Invoice Sworn Affidavit & VCO / Subcontractor / Vendor / Summary Form

Part II. Verbal Authorization (VCO) Summary

(List each VCO related to work included this invoice and attach a copy of the executed VCO form)

<u>VCO No.</u>	<u>Date Approved</u>	<u>Brief Description of Change(s)</u>
_____	_____	_____
_____	_____	_____

Part III. Subcontractor/Vendor Summary for Services/Goods That Are Not Covered by a Fixed Cost Template or Fixed Cost Price Schedule

(List each first tier sub/vendor with a total work order cost of \$2,500 or more and for which costs are included in this invoice, provide the listed information and the name, address, and phone # of the point of contact, and attach a copy of each associated sub/vendor invoice with the item number at the top right of page)

<u>Item No.</u>	<u>Name of Subcontractor/Vendor</u>	<u>Sub/Vendor Invoice No.</u>	<u>Sub/Vendor Invoice Date</u>	<u>Sub/Vendor Invoice Amt.</u>	<u>Amt. Included In This Invoice</u>	<u>Payment Agreement (Yes or No)</u>
1.	_____	_____	_____	_____	_____	_____
Contact Information: _____						
2.	_____	_____	_____	_____	_____	_____
Contact Information: _____						

Part IV. Subcontractor/Vendor Summary for Services/Goods That Are Covered by a Fixed Cost Template or Fixed Cost Price Schedule

(List each first tier sub/vendor with a total work order cost of \$2,500 or more and for which costs are included in this invoice, provide the listed information and the name, address and phone # of the point of contact. Do not attach copies of associated sub/vendor invoices)

<u>Item No.</u>	<u>Name of Subcontractor/Vendor</u>	<u>Invoice No.</u>	<u>Invoice Date</u>	<u>Payment Agreement (Yes or No)</u>
1.	_____	_____	_____	_____
Contact Information: _____				
2.	_____	_____	_____	_____
Contact Information: _____				



Reference Material

- SOP Guidance

- *Section 6.7. Invoices*

- 6.7.1. General Information
 - 6.7.2. Required Invoice Components
 - 6.7.3. Guidance on Subcontractor and Vendor Invoices
 - 6.7.4. Invoice Processing
 - 6.7.5. Invoice Verification and Approval
 - 6.7.6. Common Invoice Mistakes
 - 6.7.7. Stopping the Clock
 - 6.7.8. Returning Invoices
 - 6.7.9. Routing

- *SOP Appendix B.3.2*

- FDEP/BPSS Preapproval Invoice Checklist Multi-Event Template Format