KENTUCKY TRANSPORTATION CABINET

TC 31-519

DIVISION OF ACCOUNTS

Rev. 10/2015

STANDARD INVOICE

Please send this invoice in duplicate directly to the billing address shown on the contract. Retain another copy for your files.

SECTION 1: DELIVERY INFORMATION

PURCHASE ORDER/CONTRACT #	INVOICE #	INVOICE DATE

DELIVERY TO:

KENTUCKY TRANSPORTATION CABINET

DIVISION/DISTRICT:

SECTION 2: VENDOR INFORMATION

VENDOR:

ADDRESS *(street)*	CITY	STATE	ZIP

TERMS OF PURCHASE ORDER OR CONTRACT

SECTION 3: INVOICE INFORMATION

ITEM #	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT

(page 1) **SUBTOTAL**	$ -
(page 2) **SUBTOTAL**	$ -
DISCOUNT (%)	
NET AMOUNT	$ -

SECTION 4: VENDOR SIGNATURE CERTIFICATION BY CABINET

I hereby certify that the commodities or services specified above have been furnished to the Commonwealth of Kentucky; that the quality and prices conform to the proposal and purchase order or contract; and that payment, in whole or in part, has not been received.

CABINET USE ONLY

FIRST & LAST NAME *(printed)*	TITLE	RECEIVED & APPROVED BY
SIGNATURE ***(vendor)***	**DATE**	**DATE RECEIVED & APPROVED**

STANDARD INVOICE

SECTION 3: INVOICE INFORMATION (cont.)

ITEM #	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
				(page 2) **SUBTOTAL**	$ -

SECTION 5: VENDOR INSTRUCTIONS

1. Submit invoice to billing address shown on contract immediately upon completing shipment of all items per agreement. Partial payments are authorized on purchase contract if indicated thereon. Discount period will be computed from date of delivery or date of receipt of invoice, whichever is later.

2. Use a separate invoice for each order or contract. Partial payments will not be made unless separate shipments/payments are authorized in the contract.

3. Be certain to insert the purchase order or contract number in spaces provided.

4. Vendor certification must be signed on all copies.

5. Failure to comply will result in return of invoice for correction.