

UNITED STATES ARMY FINANCIAL MANAGEMENT SCHOOL



U.S. ARMY SOLDIER SUPPORT INSTITUTE

Student Handout # 1 Part 1

FOR

**Prepare Accounts Payable
Vouchers for Payment**

HANDOUT 1
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MISCELLANEOUS VOUCHERS

SMALL PURCHASE PAYMENTS

A. Fast Pay Procedures

1. Documentation:

- a. DD Form 1155, Purchase Order
- b. Vendor's Invoice
- c. DD Form 1155 (copy 8), Receiving Report

2. **Use:** Fast payment procedures are used to pay vendors quickly, before an authorized government representative has inspected and accepted the goods.

3. **Limitations:** Fast Payment contracts can only be used when all of the following conditions are met:

- a. Individual orders do not exceed \$25,000.00
- b. The delivery of the supplies is to occur where there is both a geographical separation and lack of adequate communication between government receiving and disbursing activities.
- c. The vendor must agree to promptly replace, repair, or correct, supplies not received, damaged in transit, or not conforming to procurement specifications.

4. **Terms:** The payment due date is 15 days after the invoice reaches the billing office. Interest is due and payable if payment is made after the due date. Invoices must be marked "**Fast Pay**", indicating that the vendor wants fast payment. The DD Form 1155 must be checked to designate the transaction a fast pay contract.

5. Fast Pay files cannot be closed until receiving reports are received, to ensure that the goods were actually received and accepted.

B. Blanket Purchase Agreement (BPA)

1. Documentation:

- a. DD Form 1155(FIGURE 1)
- b. Delivery Tickets (calls, delivery orders)(FIGURES 3 & 5)
- c. Vendor Invoices (FIGURES 4&6)

2. **Use:** A simplified method of filling anticipated repetitive needs for supplies or services, by establishing "credit accounts" with qualified sources of supply.

3. **Terms:** If not specified in the agreement, payment is due the 30th day after the end of the billing period.

ORDER FOR SUPPLIES OR SERVICES					PAGE 1 OF
1. CONTRACT/PURCH ORDER/AGREEMENT NO. DABT15-**-A-7124		2. DELIVERY ORDER/CALL NO.		3. DATE OF ORDER/CALL (YYYYMMDD) 1 OCT **	
4. REQUISITION/PURCH REQUEST NO. PRC 6374		5. PRIORITY		6. ISSUED BY Director, Purchasing and Contracting (DOC) HQS, 1/91st MECH INF Fort Stewart, GA 31314	
7. ADMINISTERED BY (If other than 6)		8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)		<div style="border: 2px solid yellow; border-radius: 50%; padding: 10px; text-align: center;"> RECEIVED IN FINANCE OFFICE COMMERCIAL VENDOR SERVICE 10 OCT ** </div>	
9. CONTRACTOR NAME AND ADDRESS AS NEEDED SUPPLIES R US 1001 SOUTH STREET RICHMOND HILL, GA 31324		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) 20**0101			
11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISAD- VANTAGED <input type="checkbox"/> WOMEN-OWNED		12. DISCOUNT TERMS NET 30		13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15	
14. SHIP TO DIRECTOR OF LOGISTICS ATTN: TRANSPORTATION OFFICER FORT STEWART, GA 31314		15. PAYMENT WILL BE MADE BY FINANCE OFFICE ATTN: CVS/COMMERCIAL VENDOR SERVICES FORT STEWART, GA 31314		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. TYPE OF ORDER DELIVERY/ CALL <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/>		This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your _____ furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.			
NAME OF CONTRACTOR		SIGNATURE		TYPED NAME AND TITLE	
DATE SIGNED (YYYYMMDD)		If this box is marked, supplier must sign Acceptance and return the following number of copies:			
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE GEORGIA SALES TAX EXEMPTION CERTIFICATE 999999					
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICES	20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
001	DESCRIPTION OF AGREEMENT: The supplier shall furnish items if and when requested by the contracting officer or representatives listed in paragraph 6 on page 2, for an indefinite EXTENT OF OBLIGATION: The government will be obligated under this agreement to the extent of authorized calls placed against the blanket purchase agreement by persons named herein.	1			0.00 0.00 0.00
*If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA	25. TOTAL 0.00
BY: I M Byer /S/				26. DIFFERENCES	
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED:					
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE 		c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE		28. SHIP. NO.		29. D.O. VOUCHER NO.	
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS		30. INITIALS	
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FINAL		32. PAID BY Finance Office Fort Stewart GA 31314 DSSN: 6348	
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER 		33. AMOUNT VERIFIED CORRECT FOR	
37. RECEIVED AT		38. RECEIVED BY (Print)		34. CHECK NUMBER	
39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		35. BILL OF LADING NO.	
41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.			

CONTRACT NO: DABT15-**-A-7124

3. NEGOTIATION AUTHORITY

The issuance of individual calls against this blanket purchase agreement will be made under authority of 10 USC 2304 (a) (6), (a) (3), or (a) (17).

4. PRICING

Prices to the government shall be as low as, or lower than those charged to the supplier's most favored customer, in addition to any discounts for prompt payment.

5. CALL LIMITATION

No individual call under this BPA shall exceed \$10,000.00.

6. INDIVIDUALS AUTHORIZED TO PLACE CALLS AND DOLLAR LIMITATION

The following personnel are authorized to place calls against this blanket purchase agreement in the dollar limitation listed.

J. T. WESSON	PROCUREMENT DIVISION	\$10,000.00
H. E. DAVIS	" " "	\$10,000.00
RONALD POWELL	" " "	\$ 5,000.00
U. B. BRANCH	TRANSPORTATION OFFICE	\$ 5,000.00
I. M. CARR	" " "	\$10,000.00

7. DELIVERY TICKETS

All delivery tickets shall be made no later than 3:00 p.m. Delivery tickets or sales slips must contain the following information:

- a. Name of supplier
- b. BPA number
- c. Date of call
- d. Call number
- e. Itemized list of supplies or services provided
- f. Quantity and price of each item less applicable discounts. (Unit prices need not be shown when incompatible with the use of automated systems, provided the invoice is itemized to show this information.)
- g. Date of delivery or shipment

A delivery ticket must be included in every shipment.

FIGURE 1 PG 2

Standard Form 1034 Revised October 1987 Department of the Treasury 1 TFM 4-2000 1034-121	PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL	VOUCHER NO.
--	--	-------------

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE ARMY FINANCE OFFICE CVS CLEARING CELL FORT STEWART, GA 31314	DATE VOUCHER PREPARED 31 JULY **	SCHEDULE NO.
	CONTRACT NUMBER AND DATE DABT15-**-A-7124	PAID BY FINANCE OFFICE FORT STEWART, GA 31314
	REQUISITION NUMBER AND DATE PRC 6374	

PAYEE'S NAME AND ADDRESS AS NEEDED SUPPLIES R US 1001 SOUTH STREET RICHMOND HILL, GA 31324	DSSN: 6348
	DATE INVOICE RECEIVED SEE BELOW
	DISCOUNT TERMS NET 30
	PAYEE'S ACCOUNT NUMBER 11111

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)											
				COST	PER												
	1-31 JUL **	Blanket Purchase Agreement per attached Invoices and calls for the month of Jul**															
		<table border="1"> <thead> <tr> <th>CALL</th> <th>INVOICE</th> <th>DATE</th> <th>DATE INV RECV'D</th> </tr> </thead> <tbody> <tr> <td>0567</td> <td>19256</td> <td>17 JUL **</td> <td>22 JUL **</td> </tr> <tr> <td>0568</td> <td>19266</td> <td>19 JUL **</td> <td>23 JUL **</td> </tr> </tbody> </table>	CALL	INVOICE	DATE	DATE INV RECV'D	0567	19256	17 JUL **	22 JUL **	0568	19266	19 JUL **	23 JUL **			\$ 420.40 \$ 566.00
CALL	INVOICE	DATE	DATE INV RECV'D														
0567	19256	17 JUL **	22 JUL **														
0568	19266	19 JUL **	23 JUL **														
TOTAL						\$ 986.40											

(Use continuation sheet(s) if necessary)		(Payee must NOT use the space below)		TOTAL	\$ 986.40
PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES		
<input type="checkbox"/> PROVISIONAL	= \$	= \$1.00			
<input type="checkbox"/> COMPLETE	BY 2				
<input type="checkbox"/> PARTIAL					
<input checked="" type="checkbox"/> FINAL	TITLE		Amount verified; correct for		\$ 986.40
<input type="checkbox"/> PROGRESS			(Signature or initials)		
<input type="checkbox"/> ADVANCE			INT		

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

JAMES R RICHARDSON, LTC, FC
DISBURSING OFFICER

(Date)
(Authorized Certifying Officer) ²
(Title)

ACCOUNTING CLASSIFICATION

021202012D12 A2ABMABM00 6100.2617 131096QLOG CA200 W4RNAA32740020 S34030 **\$986.40**

FIGURE 2

CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY FOR \$986.40	CHECK NUMBER	ON (Name of bank)
CASH	DATE	PAYEE ³	
\$			

¹ When stated in foreign currency, insert name of currency.
² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.
³ When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.

**AS NEEDED SUPPLIES R US
1001 SOUTH STREET
RICHMOND HILL, GEORGIA 31324**

CONTRACT NUMBER: **DABT15-**-A-7124**

INVOICE NUMBER	ACCOUNT NUMBER	DATE BILLED	TERMS
19256	11111	17 JULY **	NET 30

SHIP TO

**DIRECTOR OF LOGISTICS
TRANSPORTATION DIV, BLDG 11
FORT STEWART, GA 31314**

BILL TO

**FINANCE OFFICE
COMMERCIAL VENDOR SERVICES
FORT STEWART, GA 31314**

1. SPECIAL INSTRUCTIONS : NONE
2. BILLING PERIOD: 1-31 JULY **
3. ORDER: 307374

ITEM	DESCRIPTION	QTY	PRICE	AMOUNT
0001	NUTS AND BOLTS, 1"	60	.04	2.40
0002	CARBURETOR M-60-4	10	40.00	400.00
0003	TIE-RODS, 19 ** SEDAN	9	2.00	<u>18.00</u>
TOTAL:				\$420.40

**RECEIVED IN FO
CVS CLEARING CELL
23 JUL ****

I certify the goods or services hereon have been received and accepted.

I certify funds are available and chargeable to appropriation:
021202012D12 A2ABMABM00 6100.2617 131096QLOG
CA200 W4RNAA32740020 S34030

19Jul** I. M. CARR
DATE I. M. CARR, GOVT REP.

CALL NUMBER: 0567 17 Jul **
DABT15-**-A-7124

FIGURE 3

**AS NEEDED SUPPLIES R US
1001 SOUTH STREET
RICHMOND HILL, GEORGIA 31324**

CONTRACT NUMBER: **DABT15-**-A-7124**

INVOICE NUMBER	ACCOUNT NUMBER	DATE BILLED	TERMS
19256	11111	17 JULY **	NET 30

SHIP TO

**DIRECTOR OF LOGISTICS
TRANSPORTATION DIV, BLDG 11
FORT STEWART, GA 31314**

BILL TO

**FINANCE OFFICE
COMMERCIAL VENDOR SERVICE
FORT STEWART, GA 31314**

1. SPECIAL INSTRUCTIONS : NONE
2. BILLING PERIOD: 1-31 JULY **
3. ORDER: 307374

ITEM	DESCRIPTION	QTY	PRICE	AMOUNT
0001	NUTS AND BOLTS, 1"	60	.04	2.40
0002	CARBURETOR M-60-4	10	40.00	400.00
0003	TIE-RODS, 19 ** SEDAN	9	2.00	<u>18.00</u>

TOTAL: \$ 420.40

**RECEIVED IN FO
CVS CLEARING CELL
22 JUL ****

CALL NUMBER: 0567 17 Jul **
DABT15-**-A-7124

FIGURE 4

**AS NEEDED SUPPLIES R US
1001 SOUTH STREET
RICHMOND HILL, GEORGIA 31324**

CONTRACT NUMBER: **DABT15-**-A-7124**

INVOICE NUMBER	ACCOUNT NUMBER	DATE BILLED	TERMS
19266	11111	19 JULY **	NET 30

SHIP TO

**DIRECTOR OF LOGISTICS
TRANSPORTATION DIV, BLDG 11
FORT STEWART, GA 31314**

BILL TO

**FINANCE OFFICE
COMMERCIAL VENDOR SERVICE
FORT STEWART, GA 31314**

1. SPECIAL INSTRUCTIONS : NONE
2. BILLING PERIOD: 1-31 JULY **
3. ORDER: 307375

ITEM	DESCRIPTION	QTY	PRICE	AMOUNT
0001	AXLE-REAR, 2 1/2 TON	14	23.50	\$ 329.00
0002	AXLE-FRONT, 2 1/2 TON	12	19.75	\$ 237.00
TOTAL				\$ 566.00



I certify the goods or services hereon have been received and accepted.

I certify funds are available and chargeable to appropriation
021202012D12 A2ABMABM00 6100.2617 131096QLOG
CA200 W4RNAA32740020 S34030

19Jul** *I. M. CARR*
DATE I. M. CARR, GOVT REP.

CALL NUMBER: 0568 19 Jul **
DABT15-**-A-7124



**AS NEEDED SUPPLIES R US
1001 SOUTH STREET
RICHMOND HILL, GEORGIA 31324**

CONTRACT NUMBER: **DABT15-**-A-7124**

INVOICE NUMBER	ACCOUNT NUMBER	DATE BILLED	TERMS
19266	11111	19 JULY **	NET 30

SHIP TO

**DIRECTOR OF LOGISTICS
TRANSPORTATION DIV, BLDG 11
FORT STEWART, GA 31314**

BILL TO

**FINANCE OFFICE
COMMERCIAL VENDOR SERVICE
FORT STEWART, GA 31314**

- 1. SPECIAL INSTRUCTIONS : NONE
- 2. BILLING PERIOD: 1-31 JULY **
- 3. ORDER: 307375

ITEM	DESCRIPTION	QTY	PRICE	AMOUNT
0001	AXLE-REAR, 2 1/2 TON	14	23.50	\$ 329.00
0002	AXLE-FRONT, 2 1/2 TON	12	19.75	\$ 237.00
TOTAL				\$ 566.00

**RECEIVED IN
COMMERCIAL VENDOR SERVICES
23 JUL ****

CALL NUMBER: 0568 19 Jul **
DABT15-**-A-7124

FIGURE 6

PRE-CERTIFIED PAYMENTS

A. CLAIMS: Damage to Household Goods

1. Required Documentation:
 - a. SF 1034, Payment Voucher
 - b. DD Form 1842, Claims for Personal Property Against the United States.
 - c. DD Form 1844, Schedule of Property and Claim Analysis Chart.
2. Certifying Authority: JAG

B. CLOTHING PAYMENTS, MATERNITY UNIFORM CASH PAYMENTS

1. Required Documentation:
 - a. SF 1034, Payment Voucher
 - b. Doctor's statement verifying pregnancy.
2. Approving Authority: Company Commander
3. Certifying Authority: Finance office/CVS/Disbursing

C. APPREHENSIONS/DETENTION REWARDS

1. Required Documentation:
 - a. SF 1034, Payment Voucher
 - b. Itemized list of expenses
2. Certifying Authority: Provost Marshal

D. JROTC SALARIES

1. Required Documentation
 - a. SF 1034, Payment Voucher
 - b. Salary Computation
2. Approving Authority: School Principal
3. Certifying Authority: DFAS

E. OTHER PRE-CERTIFIED PAYMENTS

- a. Telephone Service
- b. Commissary Transactions
- c. Incentive Awards
- d. Honorariums and Fees
- e. Utilities
- f. USPFO Contracts
- g. Medical Treatment

TRANSPORTATION ACCOUNTS
LOCAL PAYMENT OF AIRLINES (LOPA)

A. USE: The LOPA system or a modified version is used for payments of, train, or bus passenger service. (Government Travel Services GTS is the primary system used for airline payments.)

B. REQUIRED DOCUMENTS:

1. SF 1169, US Government Transportation Request
2. Ticket Listing (Invoice)
3. Service Request
4. Travel Orders (PCS/TDY)
5. SF 1113, Public Voucher for Transportation Charges

C. PARTICIPANTS IN THE PROCESS:

1. Transportation Officer:
 - Verifies dollar amounts on service request(s) with ticket listing.
 - Submits SF 1113 and ticket listing to Finance Office

2. The Carrier:
 - Provides transportation for the government.
 - Signs the SF 1113, and submits to the transportation office.
 - Submits ticket listings to the transportation office.

3. CVS Personnel:
 - Ensures that all required documents are attached
 - Totals service requests, and compares with total amount on SF 1113.
 - Verifies accounting classification on Service Requests
 - Adds accounting classification(s) to SF 1113

D. PAYMENT DUE DATE: The payment due date is 30 days after the bill is received in the Transportation Office. Payments are subject to the provisions of the prompt payment act.

LISTING OF INFORMATION EXTRACTED FROM THE SF 1169

GTR: 5171232 1-30 JUNE **

TICKET NO.

- 01 **Traveler :** Sanders Barry
Carrier: D. P. Bus Company
Date: 15 June **
Itinerary: Savannah GA, to Fayetteville, NC

- 02 **Traveler:** Jordan Michael
Carrier: D. P. Bus Company
Date: 15 June **
Itinerary: Savannah, GA to Fayetteville NC

- 03 **Traveler:** Wynmann Marty
Carrier: D. P. Bus Company
Date: 22 June **
Itinerary: Savannah, GA to Denver, CO
and return.

- 04 **Traveler:** Scotty Rodman
Carrier: D. P. Bus Company
Date: 23 June **
Itinerary: Savannah, GA to Indianapolis, IN
and return.

TICKET LISTING

D. P. Bus Company
P. O. BOX 1211
SAVANNAH, GEORGIA, 31418

NO: 0001

DATE: 1 JULY **

TO: GOVERNMENT TRANSPORTATION CONTRACTOR
FORT STEWART, GA 31314

GTR: R5171232

TICKETING PERIOD: 1-30 JUNE **

BUS TICKET NBR 01 FOR SANDERS BARRY	\$ 291.55
BUS TICKET NBR 02 FOR JORDAN MICHAEL	\$ 291.55
BUS TICKET NBR 03 FOR WYNNMANN MARTY	\$ 410.00
BUS TICKET NBR 04 FOR SCOTTY RODMAN	\$ 398.17

SERVICE REQUEST

GTR NUMBER R5171232	TICKETING PERIOD 1-30 JUNE **	REQUEST NUMBER 0001	
TO: CARLSON WAGONLIT FORT STEWART, GA		FROM(Authorized T.O. Representative,Ext,Date,Initials) U. B. BRANCH, 2222, 10 JUNE ** UBB	
REQUESTED BY: (Name,Ext) U.B. BRANCH, 2222	ROUTED BY: (Name, Ext) J.P. PETTY, 1010	RESERVATION BY: (Name,Date) I.M. SHORT 15 JUN **	NO. PAX 2
NAME OF TRAVELER	ORIGN	CONTACT#	ORDER NUMBER, HEADQUARTERS, DATE
BARRY, SANDERS	FT STEWART	5645	012-00123 1/91 INF, Fort Stewart, 10 JUNE**
MICHAEL, JORDAN	FT STEWART	6742	012-00124 " " " " "

<p>ITINERARY</p> <p>FROM: <u>SAVANNAH, GA</u></p> <p>TO: <u>FAYETTEVILLE, NC</u></p> <p>RETURN: <u>N/A</u></p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>TICKET #</td> <td>FARE</td> <td>TAX</td> <td>TOTAL</td> </tr> <tr> <td>01</td> <td>\$291.55</td> <td>-0-</td> <td>\$291.55</td> </tr> <tr> <td>02</td> <td>\$291.55</td> <td>-0-</td> <td>\$291.55</td> </tr> </table> <p>CTO REP: ISSUE DATE TOTAL</p> <p>(Initials) IMS 10 JUNE** \$583.10</p>	TICKET #	FARE	TAX	TOTAL	01	\$291.55	-0-	\$291.55	02	\$291.55	-0-	\$291.55
TICKET #	FARE	TAX	TOTAL										
01	\$291.55	-0-	\$291.55										
02	\$291.55	-0-	\$291.55										

<p>SPECIAL ACCOMMODATIONS: NONE</p> <p>CHARGEABLE FUNDS: 202011D11 A2ABM 21P3 432100R2D2 S34030</p> <p>REMARKS - TYPE/CATEGORY OF TRAVEL <u>PCS</u></p>	
--	--

DA Form 4556 (Computer Generated)

SERVICE REQUEST

GTR NUMBER R5171232	TICKETING PERIOD 1-30 JUNE **	REQUEST NUMBER 0001	
TO: CARLSON WAGONLIT FORT STEWART, GA		FROM(Authorized T.O. Representative,Ext,Date,Initials) U. B. BRANCH ,2222 10 JUNE 19** UBB	
REQUESTED BY: (Name,Ext) U.B. BRANCH, 2222	ROUTED BY: (Name, Ext) J.P. PETTY, 1010	RESERVATION BY: (Name,Date) I.M. SHORT 15 JUN **	NO. PAX 1
NAME OF TRAVELER	ORIGN	CONTACT#	ORDER NUMBER, HEADQUARTERS, DATE
WYNNMANN, MARTY	FT STEWART	4321	06-005 1/91 INF, Fort Stewart, 8 JUNE**

<p>ITINERARY</p> <p>FROM: <u>SAVANNAH, GA</u></p> <p>TO: <u>DENVER, CO</u></p> <p>RETURN: <u>SAVANNAH, GA</u></p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p>	<p>SPECIAL ACCOMMODATIONS: NONE</p> <p>CHARGEABLE FUNDS: 202011D11 A2ABM 21P3 432100R2D3 S34030</p> <p>REMARKS - TYPE/CATEGORY OF TRAVEL <u>TDY</u></p>
---	--

TICKET #	FARE	TAX	TOTAL
03	\$410.00	-0-	\$410.00
CTO REP: ISSUE DATE TOTAL			
(Initials) IMS	18 JUNE**		\$410.00

DA Form 4556 (Computer Generated)

SERVICE REQUEST

GTR NUMBER R5171232	TICKETING PERIOD 1-30 JUNE **	REQUEST NUMBER 0001	
TO: CARLSON WAGONLIT FORT STEWART, GA		FROM(Authorized T.O. Representative, Ext, Date, Initials) U. B. BRANCH, 2222 10 JUNE 19** UBB	
REQUESTED BY: (Name,Ext) U.B. BRANCH, 2222	ROUTED BY: (Name, Ext) J.P. PETTY, 1010	RESERVATION BY: (Name, Date) I.M. SHORT 15 JUN **	NO. PAX 1
NAME OF TRAVELER	ORIGN	CONTACT#	ORDER NUMBER, HEADQUARTERS, DATE
RODMAN, SCOTTY	FT STEWART	3433	06-006 1/91 INF, Fort Stewart, 12 JUNE**

<p align="center">ITINERARY</p> <p>FROM: <u>SAVANNAH, GA</u></p> <p>TO: <u>INDIANAPOLIS, IN</u></p> <p>RETURN: <u>SAVANNAH, GA</u></p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p> <p>FROM: _____</p> <p>TO: _____</p> <p>RETURN: _____</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>SPECIAL ACCOMMODATIONS:</td> <td>TICKET #</td> <td>FARE</td> <td>TAX</td> <td>TOTAL</td> </tr> <tr> <td>NONE</td> <td>004</td> <td>\$398.17</td> <td>-0-</td> <td>\$398.17</td> </tr> <tr> <td>CHARGEABLE FUNDS:</td> <td colspan="4"> </td> </tr> <tr> <td>202011D11 A2ABM 21P3 432100R2D4 S34030</td> <td colspan="4"> </td> </tr> <tr> <td>REMARKS - TYPE/CATEGORY OF TRAVEL <u>TDY</u></td> <td>CTO REP:</td> <td>ISSUE DATE</td> <td colspan="2">TOTAL</td> </tr> <tr> <td> </td> <td>(Initials) IMS</td> <td>18 JUNE**</td> <td colspan="2">\$398.17</td> </tr> </table>	SPECIAL ACCOMMODATIONS:	TICKET #	FARE	TAX	TOTAL	NONE	004	\$398.17	-0-	\$398.17	CHARGEABLE FUNDS:					202011D11 A2ABM 21P3 432100R2D4 S34030					REMARKS - TYPE/CATEGORY OF TRAVEL <u>TDY</u>	CTO REP:	ISSUE DATE	TOTAL			(Initials) IMS	18 JUNE**	\$398.17	
SPECIAL ACCOMMODATIONS:	TICKET #	FARE	TAX	TOTAL																											
NONE	004	\$398.17	-0-	\$398.17																											
CHARGEABLE FUNDS:																															
202011D11 A2ABM 21P3 432100R2D4 S34030																															
REMARKS - TYPE/CATEGORY OF TRAVEL <u>TDY</u>	CTO REP:	ISSUE DATE	TOTAL																												
	(Initials) IMS	18 JUNE**	\$398.17																												

DA Form 4556 (Computer Generated)

TRANSPORTATION ACCOUNTS
LOCAL PAYMENT OF AIRLINES (LOPA)

A. USE: The LOPA system or a modified version is used for payments of, train, or bus passenger service. (The Government Transportation System GTS is the primary system used for airline payments.)

B. REQUIRED DOCUMENTS:

1. SF 1169, US Government Transportation Request
2. Ticket Listing (Invoice)
3. Service Request
4. Travel Orders (PCS/TDY)
5. SF 1113, Public Voucher for Transportation Charges

C. PARTICIPANTS IN THE PROCESS:

1. Transportation Officer:
 - Verifies dollar amounts on service request(s) with ticket listing.
 - Submits SF 1113 and ticket listing to OPLOC

2. The Carrier:
 - Provides transportation for the government.
 - Signs the SF 1113, and submits to the transportation office.
 - Submits ticket listings to the transportation office.

3. CVS Personnel:
 - Ensures that all required documents are attached
 - Totals service requests, and compares with total amount on SF 1113.
 - Verifies accounting classification on Service Requests
 - Adds accounting classification(s) to SF 1113

(Accounting classification for PCS is: 202011D11 A2ABM 21P3 432100R2D2 S34030)

D. PAYMENT DUE DATE: The payment due date is 30 days after the bill is received in the Transportation Office. Payments are subject to the provisions of the prompt payment act.

REQUEST AND AUTHORIZATION FOR TDY TRAVEL OF DOD PERSONNEL <i>(Reference: Joint Travel Regulations)</i> Travel Authorized as Indicated in Items 2 through 21.						1. DATE OF REQUEST 7 June **
REQUEST FOR OFFICIAL TRAVEL						
2. NAME (Last, First, Middle Initial) WYNNMANN, MARTY 111-11-2211			3. POSITION TITLE AND GRADE OR RATING Director, Resource Management, GS-12			
4. OFFICIAL STATION FORT STEWART, GA 31314			5. ORGANIZATIONAL ELEMENT 1/91st MECH INF		6. PHONE NO. DSN: 626-3433	
7. TYPE OF ORDERS TDY		8. SECURITY CLEARANCE SECRET		9. PURPOSE OF TDY Attend seminar on model computer system for Resource Management. 22-28 JUNE ** POC: MAJ Beausly DSN: 626-4329		
10a. APPROX. NO. OF DAYS OF TDY (Including travel time) 7		10b. PROCEED OIA (Date) 18 JUNE **				
11. ITINERARY <input type="checkbox"/> VARIATION AUTHORIZED FROM: Fort Stewart, Georgia TO: DFAS-DENVER, Colorado RETURN: Fort Stewart, Georgia						
MODE OF TRANSPORTATION						
COMMERCIAL		GOVERNMENT			PRIVATELY OWNED CONVEYANCE (Check one)	
RAIL	AIR	BUS	SHIP	AIR	VEHICLE	SHIP
		X				
<input type="checkbox"/> AS DETERMINED BY APPROPRIATE TRANSPORTATION OFFICER (Overseas Travel only)				<input type="checkbox"/> MORE ADVANTAGEOUS TO GOVERNMENT		
<input type="checkbox"/> MILEAGE REIMBURSEMENT AND PER DIEM LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER TRANSPORTATION AND RELATED PER DIEM AS DETERMINED IN JTR. TRAVEL TIME LIMITED AS INDICATED IN JTR.						
13. <input checked="" type="checkbox"/> PER DIEM AUTHORIZED IN ACCORDANCE WITH JTR. <input type="checkbox"/> OTHER RATE OF PER DIEM (Specify)						
ESTIMATED COST						15. ADVANCE AUTHORIZED
PER DIEM	TRAVEL	OTHER	TOTAL			
\$ 452.00	\$ 410.00	\$ 100.00	\$ 962.00	\$ MAX		
16. REMARKS (Use this space for special requirements, leave, superior or 1st-class accommodations, excess baggage, registration fees, etc.) Government facilities will be used to the fullest extent possible. If government facilities are not available, the traveler must obtain a Statement of Non-Availability from the Billeting Office. Traveler will submit one copy of paid travel voucher to Budget office upon receipt.						
17. REQUESTING OFFICIAL (Title and signature) TERRY DAVIS TERRY DAVIS, LTC, IN, XO, 1/91st MECH INF				18. APPROVING OFFICIAL (Title and signature) MIKE JOHNSON MIKE JOHNSON, COL, IN, Commander 1/91st MECH INF		
AUTHORIZATION						
19. ACCOUNTING CITATION 202011D11 A2ABM 21T1 432100R2E4 S34030 \$410.00 21T2 \$552.00 Frederick Adams FREDERICK ADAMS, Budget Analyst						
20. ORDER AUTHORIZING OFFICIAL (Title and signature) OR AUTHENTICATION Mike Johnson MIKE JOHNSON, COL, IN, Commander, 1/91st MECH INF				21. DATE ISSUED 8 JUNE **		
				22. TRAVEL ORDER NUMBER 100R2E4		

DD FORM 1610, JUN 67 (EF)

REPLACES DISA FORM 24 WHICH MAY BE USED UNTIL SUPPLY EXHAUSTED.

REQUEST AND AUTHORIZATION FOR TDY TRAVEL OF DOD PERSONNEL <small>(Reference: Joint Travel Regulations)</small> Travel Authorized as Indicated in Items 2 through 21.				1. DATE OF REQUEST 7 June **				
REQUEST FOR OFFICIAL TRAVEL								
2. NAME (Last, First, Middle Initial) RODMAN, SCOTTY 911-91-1911			3. POSITION TITLE AND GRADE OR RATING Quality Assurance , GS-9					
4. OFFICIAL STATION FORT STEWART, GA 31314			5. ORGANIZATIONAL ELEMENT 1/91st MECH INF		6. PHONE NO. DSN: 626-3433			
7. TYPE OF ORDERS TDY		8. SECURITY CLEARANCE SECRET	9. PURPOSE OF TDY Attend seminar on quality assurance compliance. 23-28 JUNE ** POC: M R ALLCLEAR DSN: 626-2222					
10a. APPROX. NO. OF DAYS OF TDY (Including travel time) 6		10b. PROCEED VIA (Date) 18 JUNE **						
11. ITINERARY <input type="checkbox"/> VARIATION AUTHORIZED FROM: Fort Stewart, Georgia TO: DFAS-INDIANAPOLIS, Indiana RETURN: Fort Stewart, Georgia								
MODE OF TRANSPORTATION								
COMMERCIAL		GOVERNMENT		PRIVATELY OWNED CONVEYANCE (Check one)				
RAIL	AIR	BUS	SHIP	AIR	VEHICLE	SHIP	RATE PER MILE:	
		X					<input type="checkbox"/> MORE ADVANTAGEOUS TO GOVERNMENT	
<input type="checkbox"/> AS DETERMINED BY APPROPRIATE TRANSPORTATION OFFICER (Overseas Travel only)				<input type="checkbox"/> MILEAGE REIMBURSEMENT AND PER DIEM LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER TRANSPORTATION AND RELATED PER DIEM AS DETERMINED IN JTR. TRAVEL TIME LIMITED AS INDICATED IN JTR.				
13. <input checked="" type="checkbox"/> PER DIEM AUTHORIZED IN ACCORDANCE WITH JTR. <input type="checkbox"/> OTHER RATE OF PER DIEM (Specify)								
ESTIMATED COST								
PER DIEM		TRAVEL		OTHER	TOTAL	15. ADVANCE AUTHORIZED		
\$ 372.00		\$ 398.17		\$ 100.00	\$ 870.17	\$ MAX		
16. REMARKS (Use this space for special requirements, leave, superior or 1st-class accommodations, excess baggage, registration fees, etc.) Government facilities will be used to the fullest extent possible. If government facilities are not available, the traveler must obtain a Statement of Non-Availability from the Billeting Office. Traveler will submit one copy of paid travel voucher to the Budget office upon receipt.								
17. REQUESTING OFFICIAL (Title and signature) TERRY DAVIS TERRY DAVIS, LTC, IN, XO, 1/91st MECH INF				18. APPROVING OFFICIAL (Title and signature) MIKE JOHNSON MIKE JOHNSON, COL, IN, Commander 1/91st MECH INF				
AUTHORIZATION								
19. ACCOUNTING CITATION: 202011D11 A2ABM 21T1 432100R2E5 S34030 \$398.17 21T2 \$472.00 Frederick Adams FREDERICK ADAMS, Budget Analyst								
20. ORDER AUTHORIZING OFFICIAL (Title and signature) OR AUTHENTICATION Mike Johnson MIKE JOHNSON, COL, IN, Commander, 1/91st MECH INF				21. DATE ISSUED 12 JUNE **				
				22. TRAVEL ORDER NUMBER 100R2E5				

DD FORM 1610, JUN 67 (EF)

REPLACES DSA FORM 24 WHICH MAY BE USED UNTIL SUPPLY EXHAUSTED.

SHELL OIL COMPANY
P. O. BOX 110
TULSA, OK 74102

1 JUN **

DEPARTMENT OF THE ARMY
 DIRECTOR OF LOGISTICS
 ATTN: TRANSPORTATION OFFICE
 FORT STEWART, GA 31314

ACCOUNT NUMBER
 501 676 535

INVOICE NUMBER
 0815321

CONTRACT NUMBER
 DLA600-**-D-0173

Billing Period: 1-31 May **

STATE	TYPE-FUEL	INV #	GROSS AMOUNT	FUEL GAL	FEDERAL TAX	SALES/LOCAL TAX	NET AMOUNT
AL	GAS	1	\$ 49.74	60.3	\$6.18	\$2.74	\$ 40.82
AL	DIESEL	1	\$ 29.70	36.6	\$-0-	\$1.04	\$ 28.66
FL	DIESEL	1	\$ 72.67	86.0	\$-0-	\$-0-	\$ 72.67
GA	GAS	2	\$ 69.48	84.4	\$7.12	\$4.17	\$ 58.19
GA	DIESEL	1	\$108.97	128.1	\$-0-	\$6.00	\$102.97
SC	GAS	2	\$119.75	135.7	\$16.35	\$-0-	\$103.40
TOTALS		8	\$450.31	531.1	\$29.65	\$13.95	\$406.71

RECEIVED IN FINANCE OFFICE
 COMMERCIAL VENDOR SERVICES
 8 JUN **

RECEIVED IN TRANSPORTATION
 6 JUNE **

501 676 535	AMOUNT:	\$50.00
093776555213	EXPIR DATE	12/**
0502**		
USAR CENTER	A526	
SELLER	LEWIS SHELL COLUMBIA, SC 207 SHELL OIL	A15723 INVOICE NUMBER
		<i>Dennis Rodman</i> PURCHASER
GAS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	QTY PRICE
OTHER		50 1.00
VEH. TAG	R9982	STATE GA AUTH USAR

501 676 535	AMOUNT:	\$45.00
36188449825	EXPIR DATE	12/**
0522**		
1/91st MECH LINE	DL01	
SELLER	PARHAM SHELL SAVANNAH, GA 563 SHELL OIL	A99312 INVOICE NUMBER
		<i>Michael Jordan</i> PURCHASER
GAS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	QTY PRICE
OTHER		50 .90
VEH. TAG	S9702	STATE GA AUTH RA

501 676 535	AMOUNT:	\$108.97
76501300100	EXPIR DATE	12/**
0505**		
1/91st MECH LINE	DL01	
SELLER	LIBERT SHELL GLENNVILLE, GA 302 SHELL OIL	D62153 INVOICE NUMBER
		<i>Scotty Pippen</i> PURCHASER
GAS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	QTY PRICE
OTHER		128.2 .85
VEH. TAG	A7891	STATE GA AUTH RA

501 676 535	AMOUNT:	\$24.48
26299800124	EXPIR DATE	12/**
0512**		
USAR CENTER	A502	
SELLER	SULLIVAN SHELL CLAXTON, GA 116 SHELL OIL	R93722 INVOICE NUMBER
		<i>Shaquille O'neil</i> PURCHASER
GAS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	QTY PRICE
OTHER		28.8 .85
VEH. TAG	R9234	STATE GA AUTH USAR

501 676 535	AMOUNT:	\$72.67
56577290003	EXPIR DATE	12/**
0520**		
USAR CENTER	A526	
SELLER	ADAMS SHELL JACKSONVILLE, FL 309 SHELL OIL	A78754 INVOICE NUMBER
		<i>Ron Harper</i> PURCHASER
GAS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	QTY PRICE
OTHER	DIESEL	86 .845
VEH. TAG	T9342	STATE GA AUTH USAR

501 676 535	AMOUNT:	\$49.74
11245678013	EXPIR DATE	12/**
0516**		
USAR CENTER	A509	
SELLER	OHLENDORF SHELL BIRMINGHAM, AL 691 SHELL OIL	M17532 INVOICE NUMBER
		<i>Grant Hill</i> PURCHASER
GAS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	QTY PRICE
OTHER		60.1 82.9
VEH. TAG	L2340	STATE GA AUTH USAR

501 676 535	AMOUNT:	\$29.70
136787010313	EXPIR DATE	12/**
0515**		
1/91st MECH LINE	MJHA	
SELLER	JOHNSON SHELL GADSEN, AL 460 SHELL OIL	P23567 INVOICE NUMBER
		<i>Penny Hardaway</i> PURCHASER
GAS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	QTY PRICE
OTHER	DIESEL	36.1 .825
VEH. TAG	G4325	STATE GA AUTH RA

501 676 535	AMOUNT:	\$69.75
4981855662	EXPIR DATE	12/**
0518**		
USAR CENTER	A532	
SELLER	RHODES SHELL COLUMBIA, SC 782 SHELL OIL	C81259 INVOICE NUMBER
		<i>Tim McGraw</i> PURCHASER
GAS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	QTY PRICE
OTHER		77.5 .90
VEH. TAG	H6789	STATE GA AUTH USAR

Standard Form 1034 Revised October 1987 Department of the Treasury 1 TFM 4-2000 1034-121		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL				VOUCHER NO.			
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE ARMY FINANCE OFFICE FORT STEWART, GA 31314				DATE VOUCHER PREPARED 9 JUNE**		SCHEDULE NO.			
				CONTRACT NUMBER AND DATE DLA600-**-D-0173		PAID BY FINANCE OFFICE FORT STEWART, GA 31314			
<table border="0" style="width:100%;"> <tr> <td style="width: 15%;">PAYEE'S NAME AND ADDRESS</td> <td style="border: 1px solid black; padding: 5px;">SHELL OIL COMPANY P. O. BOX 110 TULSA OK 74102</td> </tr> </table>				PAYEE'S NAME AND ADDRESS	SHELL OIL COMPANY P. O. BOX 110 TULSA OK 74102			REQUISITION NUMBER AND DATE PRC 6374	
				PAYEE'S NAME AND ADDRESS	SHELL OIL COMPANY P. O. BOX 110 TULSA OK 74102				
						DATE INVOICE RECEIVED 6 JUNE **			
						DISCOUNT TERMS NET 30			
				PAYEE'S ACCOUNT NUMBER 501 676 535					
SHIPPED FROM			TO		WEIGHT		GOVERNMENT B/L NUMBER		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN- TITY	UNIT PRICE		AMOUNT (1)			
				COST	PER				
	1-31MAY**	Per detailed bill herewith attached attached dtd 1 June ** Payment Due Date: 6 July **				\$450.31			
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)						TOTAL	\$ 450.31		
PAYMENT:		APPROVED FOR	EXCHANGE RATE	DIFFERENCES					
<input type="checkbox"/> PROVISIONAL <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		= \$	= \$1.00	Sales Tax		(\$13.95)			
		BY 2		Amount verified; correct for		\$ 436.36			
		TITLE	(Signature or initials)		INT				
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.									
_____ <small>(Date)</small>		JAMES R RICHARDSON, LTC, FC <small>(Authorized Certifying Officer) 2</small>		DISBURSING OFFICER <small>(Title)</small>					
ACCOUNTING CLASSIFICATION									
See continuation sheet									
CHECK NUMBER		ON ACCOUNT OF U.S. TREASURY FOR \$436.36		CHECK NUMBER		ON (Name of bank)			
CASH		DATE		PAYEE 3					
\$									
1 When stated in foreign currency, insert name of currency.				PER					
2 If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.				TITLE					
3 When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.									

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

VOUCHER NO.

SCHEDULE NO.

SHEET NO.

2/2

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
DEPARTMENT OF THE ARMY, FINANCE OFFICE
FORT STEWART, GA 31314

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES	QUAN TITY	UNIT PRICE COST PER	AMOUNT
202011D 11	A2ABM	131079QPPW 26BK 4321001211 S34030			\$ 28.66
202011D 11	A2ABM	131079QPPW 26BK 4321001212 S34030			\$102.97
202011D 11	A2ABM	131079QPPW 26BK 4321001213 S34030			\$ 42.30
202011D 11	A2ABM	131079QPPW 26BK 4321001214 S34030			\$ 23.01
202011D 11	A2ABM	131079QPPW 26BK 4321001215 S34030			\$ 47.00
202011D 11	A2ABM	131079QPPW 26BK 4321001216 S34030			\$ 50.00
202011D 11	A2ABM	131079QPPW 26BK 4321001217 S34030			\$ 72.67
202011D 11	A2ABM	131079QPPW 26BK 4321001218 S34030			\$ 69.75
		26BJ (GAS) 26BK(DIESEL)			

APPLY STOPPAGES AND OFFSETS AGAINST CONTRACTORS

A. OFFSETS AGAINST CURRENT CONTRACT:

1. Credit old accounting classification.
2. Annotate bills register card with offset information.
3. Deferred Payments.

B. OFFSETS WITHOUT EXISTING CONTRACT:

Forward contract folder to Accounts Receivable.

C. CAUSES OF CONTRACTOR INDEBTEDNESS:

1. Default - Vendor fails to comply with or complete the contract.
2. Delay - Vendor fails to furnish supplies or services within a specified time period.

D. LIQUIDATION METHOD - Amount due US in lieu of actual damages.

E. ACTUAL DAMAGES - Actual monetary loss by the Government.

F. BANKRUPTCY:

1. Chapter 7: Total liquidation
2. Chapter 11: Debtor in possession
3. Procedures:
 - a. Flag contract folder
 - b. Follow instruction in the bankruptcy letter
 - c. Forward certified payment voucher to DFAS-IN for amounts earned prior to petition date.

TRANSPORTATION ACCOUNTS
LOCAL PAYMENT OF AIRLINES (LOPA)

A. USE: The LOPA system or a modified version is used for payments of, train, or bus passenger service. (The Government Transportation System GTS is the primary system used for airline payments.)

B. REQUIRED DOCUMENTS:

1. SF 1169, US Government Transportation Request
2. Ticket Listing (Invoice)
3. Service Request
4. Travel Orders (PCS/TDY)
5. SF 1113, Public Voucher for Transportation Charges

C. PARTICIPANTS IN THE PROCESS:

1. Transportation Officer:
 - Verifies dollar amounts on service request(s) with ticket listing.
 - Submits SF 1113 and ticket listing to OPLOC

2. The Carrier:
 - Provides transportation for the government.
 - Signs the SF 1113, and submits to the transportation office.
 - Submits ticket listings to the transportation office.

3. CVS Personnel:
 - Ensures that all required documents are attached
 - Totals service requests, and compares with total amount on SF 1113.
 - Verifies accounting classification on Service Requests
 - Adds accounting classification(s) to SF 1113

D. PAYMENT DUE DATE: The payment due date is 30 days after the bill is received in the Transportation Office. Payments are subject to the provisions of the prompt payment act.

**PUBLIC VOUCHER FOR PURCHASES AND
 SERVICES OTHER THAN PERSONAL**

VOUCHER NO.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
DEPARTMENT OF THE ARMY
FINANCE OFFICE
FORT STEWART, GA, 31314

DATE VOUCHER PREPARED
12 DEC **

SCHEDULE NO.

CONTRACT NUMBER AND DATE
DABT15--F-0988**

**PAID BY
 FINANCE OFFICE
 FORT STEWART,
 GA, 31314**

REQUISITION NUMBER AND DATE
PRC 1125

DSSN: 6348

**PAYEE'S
 NAME
 AND
 ADDRESS**

NONPERFORMER ELECTRONICS
290 E. STATE ST.
GLENNVILLE, GA 30427

DATE INVOICE RECEIVED
25 NOV **

DISCOUNT TERMS
NET 30

PAYEE'S ACCOUNT NUMBER
NONE

SHIPPED FROM

TO

WEIGHT

GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
	27 Nov**	Per detailed bill herewith attached dated 22 Nov **. Less offset of \$150.00 per non-performance notification dated 1 Dec ** for Contr. DABT15-**-F-0987 Payment Due Date: 27 December **				\$1,500.00

(Use continuation sheet(s) if necessary)

(Payee must NOT use the space below)

TOTAL

\$1,500.00

PAYMENT: <input type="checkbox"/> PROVISIONAL <input type="checkbox"/> COMPLETE <input checked="" type="checkbox"/> PARTIAL 1st <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES	
	= \$	= \$1.00		
	BY 2		Amount verified; correct for	\$1,350.00
	TITLE		(Signature or initials)	INT

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

JAMES R. RICHARDSON, LTC, FC

DISBURSING OFFICER

(Date)

(Authorized Certifying Officer) 2

(Title)

ACCOUNTING CLASSIFICATION

New contract 202011D 11 A2ABM 131079QPPW 26CB 4321001347 S34030 \$1500.00

Old Contract 202011D 11 A2ABM 131079QPPW 26CB 4321001346 S34030 (\$150.00)

CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY FOR \$1350.00	CHECK NUMBER	ON (Name of bank)
CASH	DATE	PAYEE 3	
\$			

¹ When stated in foreign currency, insert name of currency.

² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.

³ When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.

PER

TITLE

Previous edition usable

PRIVACY ACT STATEMENT
 The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

NSN 7540-00-900-2234

USAPPC V1.00

TRANSPORTATION ACCOUNTS
LOCAL PAYMENT OF AIRLINES (LOPA)

A. USE: The LOPA system or a modified version is used for payments of, train, or bus passenger service. (The Government Transportation System GTS is the primary system used for airline payments.)

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1. Transportation Officer:
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2. The Carrier:
 - Provides transportation for the government.
 - Signs the SF 1113, and submits to the transportation office.
 - Submits ticket listings to the transportation office.
3. Accounts Payable Personnel:
 - Ensures that all required documents are attached
 - Totals service requests, and compares with total amount on SF 1113.
 - Verifies accounting classification on Service Requests
 - Adds accounting classification(s) to SF 1113

D. PAYMENT DUE DATE: The payment due date is 30 days after the bill is received in the Transportation Office. Payments are subject to the provisions of the prompt payment act.

PAYMENTS UNDER CONTRACTS WITH FINANCING PROVISIONS

A. ADVANCE PAYMENTS

Purpose: Money advanced from the Government to a prime contractor, in anticipation of, and for the purpose of complete performance.

Uses:

1. Subscriptions
2. Post Office Box Rentals
3. Pay-As-You-Go Mail program.
4. Develop or establish military facilities.
5. Street car tickets or tokens, toll road permits
6. Payment of public refuse tickets
7. Payment for state or local governments
8. Tuition and Training
9. COD Charges
10. Copyrights and patents
11. Utility connection charges
12. Petition and witness fees
13. Professional societies
14. Meeting attendance
15. Contract funding

Required Documentation:

Procurement Document

Request for payment/invoice

B. PROGRESS PAYMENTS:

Purpose: Payment of costs incurred as work in progress or based on percentage of completion.

Use: Construction Contracts (Financing Provision)

Required Documentation:

Procurement Document

Certificate of Performance/Receiving Report

Vendor's Invoice

SOLICITATION, OFFER AND AWARD		1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 7900)		RATING	PAGE 1 OF 2 PAGES
--------------------------------------	--	--	--	--------	-------------------

2. CONTRACT NUMBER DABT15--C-0724	3. SOLICITATION NUMBER	4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input type="checkbox"/> NEGOTIATED (RFP)	5. DATE ISSUED 10 JUL **	6. REQUISITION/PURCHASE NUMBER PRC 0755
--------------------------------------	------------------------	---	-----------------------------	--

7. ISSUED BY DIRECTOR, CONTRACTING AND PROCUREMENT FORT STEWART, GA 31314	CODE	8. ADDRESS OFFER TO (If other than Item 7)
---	------	--

**RECEIVED IN FO
COMMERCIAL VENDOR SERVICES
29 JUL ****

NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder".

SOLICITATION	
9. Sealed offers in original and <u>3</u> copies for furnishing the supplies or services in the Schedule will be received at the place specified in Item 8, or if hand carried, in the depository located in <u>BLDG 10000</u> until <u>10:00AM</u> local time <u>25 AUG **</u>	(Date)

CAUTION - LATE Submissions, Modifications, and Withdrawals: See Section L, Provision No. 52.214-7 or 52.215-1. All offers are subject to all terms and conditions contained in this solicitation.

10. FOR INFORMATION CALL:	A. NAME I. M. BYER	B. TELEPHONE (NO COLLECT CALLS)			C. E-MAIL ADDRESS isaac.m.byer@us.army.mil
	AREA CODE 803	NUMBER 626	EXT. 8680		

11. TABLE OF CONTENTS							
(X)	SEC.	DESCRIPTION	PAGE(S)	(X)	SEC.	DESCRIPTION	PAGE(S)
PART I - THE SCHEDULE				PART II - CONTRACT CLAUSES			
X	A	SOLICITATION/CONTRACT FORM	1	X	I	CONTRACT CLAUSES	2
X	B	SUPPLIES OR SERVICES AND PRICES/COSTS	1-2	PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH.			
X	C	DESCRIPTION/SPECS./WORK STATEMENT	1-2	X	J	LIST OF ATTACHMENTS	
X	D	PACKAGING AND MARKING		PART IV - REPRESENTATIONS AND INSTRUCTIONS			
X	E	INSPECTION AND ACCEPTANCE	1-2	X	K	REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS	1-2
X	F	DELIVERIES OR PERFORMANCE	1-2	X	L	INSTRS., CONDS., AND NOTICES TO OFFERORS	
X	G	CONTRACT ADMINISTRATION DATA	1	X	M	EVALUATION FACTORS FOR AWARD	
X	H	SPECIAL CONTRACT REQUIREMENTS	1-2				

OFFER (Must be fully completed by offeror)

NOTE: Item 12 does not apply if the solicitation includes the provisions at 52.214-16, Minimum Bid Acceptance Period.

12. In compliance with the above, the undersigned agrees, if this offer is accepted within _____ calendar days (90 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52.232-6)	<input type="checkbox"/> 10 CALENDAR DAYS (%)	<input type="checkbox"/> 20 CALENDAR DAYS (%)	<input type="checkbox"/> 30 CALENDAR DAYS (%)	CALENDAR DAYS(%) 14
14. ACKNOWLEDGMENT OF AMENDMENTS (The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated):	AMENDMENT NO.	DATE	AMENDMENT NO.	DATE

15A. NAME AND ADDRESS OF OFFEROR WATSON CONSTRUCTION CO P. O. BOX 11123 RICHMOND HILL, GA 31324	CODE	FACILITY	16. NAME AND THE TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print) S. A. WATSON FOREMAN
15B. TELEPHONE NUMBER AREA CODE 555	NUMBER 2326880	EXT. 	17. SIGNATURE
15C. CHECK IF REMITTANCE ADDRESS IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS IN SCHEDULE. <input type="checkbox"/>			18. OFFER DATE 20 JUL **

AWARD (To be completed by Government)

19. ACCEPTED AS TO ITEMS 0001	20. AMOUNT 400,000.00	21. ACCOUNTING AND APPROPRIATION 202011D11 A2ABM 131079QPPW 257H 5321004446 S34030
22. AUTHORITY FOR USING OTHER THAN FULL OPEN COMPETITION: <input checked="" type="checkbox"/> 10 U.S.C. 2304 (c) <input type="checkbox"/> 41 U.S.C. 253 (c)	23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified)	ITEM
24. ADMINISTERED BY (If other than Item 7) DIR, PUBLIC WORKS (DPW) BLDG, 10032 FORT STEWART, GA 31324	25. PAYMENT WILL BE MADE BY FINANCE OFFICE ATTN: COMMERCIAL VENDOR SERVICES FORT STEWART, GA 31314	CODE
26. NAME OF CONTRACTING OFFICER (Type or print) I. M. BYER, GS-12	27. UNITED STATES OF AMERICA (Signature of Contracting Officer)	28. AWARD DATE 27 JUL **

IMPORTANT - Award will be made on this Form, or on Standard Form 26, or by other authorized official written notice.
 AUTHORIZED FOR LOCAL REPRODUCTION
 Previous edition is unusable
STANDARD FORM 33 (REV., 9-97)
 Prescribed by GSA - Far (48 CFR) 53.214 (c)

CONTINUATION SHEET
WATSON CONSTRUCTION CO. P.O. BOX 11123 RICHMOND HILL, GA 31324
DABT15-**-C-0724

<u>ITEM</u>	<u>SUPPLY/SERVICE</u>	<u>QTY</u>	<u>U/I</u>	<u>U/P</u>	<u>AMOUNT</u>
0001	Renovation of quarters 500-600 for the period 1 Aug -30 Sep **. Includes: Painting, general repairs, plumbing, cleaning, and building supplies, (Progress Payment Authorized)				\$400,000.00

NOTE 1:

DELIVERIES: F.O.B. Destination

SHIP TO: DIR, PUBLIC WORKS
 BLDG 10032
 FORT STEWART, GA 31314

NOTE 2:

PAYMENT TERMS: Progress payments will be made upon receipt of certificate of performance for the percentage of work completed, less the retained amount as applicable. The invoice must contain the following:

- 1) The contract number
- 2) Date of invoice
- 3) Description
- 4) Terms
- 5) Extension/Footing
- 6) Percentage of completion

NOTE 3:

CONTRACT TYPE: This is a fixed price contract.

Standard Form 1034
Revised October 1987
Department of the Treasury
1 TFM 4-2000
1034-121

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

VOUCHER NO.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
**DEPARTMENT OF THE ARMY
FINANCE OFFICE
FORT STEWART, GA 31314**

DATE VOUCHER PREPARED
15 SEP **
CONTRACT NUMBER AND DATE
DABT15--C-0724**
REQUISITION NUMBER AND DATE
PRC 0755

SCHEDULE NO.

PAID BY
**FINANCE OFFICE
FORT STEWART,
GA, 31314**

DSSN: 6348

PAYEE'S NAME AND ADDRESS
**WATSON CONSTRUCTION CO
P. O. BOX 11123
RICHMOND HILL, GA 31324**

DATE INVOICE RECEIVED
1 SEP **

DISCOUNT TERMS
NET 14

PAYEE'S ACCOUNT NUMBER
NONE

SHIPPED FROM TO WEIGHT GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
84736	31 AUG**	Per attached invoices dated 31 Aug ** Reflecting 50% completion Payment Due Date: 15 Sep **				\$200,000.00

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$200,000.00

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES	
<input type="checkbox"/> PROVISIONAL	= \$	= \$1.00	less retained %	\$20,000.00
<input type="checkbox"/> COMPLETE	BY ²			
<input type="checkbox"/> PARTIAL			Amount verified; correct for	\$180,000.00
<input type="checkbox"/> FINAL	TITLE		(Signature or initials)	INT
<input checked="" type="checkbox"/> PROGRESS				
<input type="checkbox"/> ADVANCE				

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

(Date) **JAMES R. RICHARDSON, LTC, FC** _____
(Authorized Certifying Officer)² DISBURSING OFFICER (Title)

ACCOUNTING CLASSIFICATION

202011D11 A2ABM 131079QPPW 257H 4321008481 34030 \$180,000.00

CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)
	FOR \$180,000.00		
CASH	DATE	PAYEE ³	
\$			

¹ When stated in foreign currency, insert name of currency.
² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.
³ When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.

Previous edition usable **PRIVACY ACT STATEMENT** NSN 7540-00-900-2234
The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation. USAPPC V1.00

CERTIFICATE OF PERFORMANCE

DEPARTMENT OF THE ARMY
DIRECTOR OF PUBLIC WORKS
ATTN: BLDG, 10032
FORT STEWART , GA 31314

NUMBER: 84736
DATE
BILLED: 31 AUGUST **
CONTRACT
NUMBER: DABT15-**-C-0724

**RECEIVED IN DPW
1 SEP****

DESCRIPTION OF SERVICES	ESTIMATED COST	PERCENTAGE OF COMPLETION
RENOVATE QUARTERS 500-600	\$400,000.00	50%

AMOUNT CLAIMED FOR PERIOD 1-31 AUGUST ** = \$400,000.00 X 50 = \$200,000.00

LESS RETAINED PERCENTAGE @ 10% = \$ 20,000.00

NET AMOUNT: \$180,000.00

ACCOUNTING CLASSIFICATION: 202011D11 A2ABM 131079QPPW 257H 4321008481 S34030

VENDOR: WATSON CONSTRUCTION CO
P.O. BOX 11123
RICHMOND HILL, GA 31324

Shawn A. Watson
S. A. WATSON, FOREMAN

CERTIFICATION: I CERTIFY THAT THE SERVICES LISTED ON THIS INVOICE ARE AN ACCURATE REPRESENTATION OF SERVICES PERFORMED.
SERVICES ACCEPTED 31 AUGUST **

E.J. DAVIS
E. J. DAVIS
DIR, PUBLIC WORKS
FORT STEWART, GA

**RECEIVED IN FO
COMMERCIAL VENDOR SERVICE
2 SEP ****

ORDER FOR SUPPLIES OR SERVICES					PAGE 1 OF				
1. CONTRACT/PURCH ORDER/AGREEMENT NO. DABT15-**-M-5234		2. DELIVERY ORDER/CALL NO.		3. DATE OF ORDER/CALL (YYYYMMDD) 20**JAN16		4. REQUISITION/PURCH REQUEST NO. PRC 0125		5. PRIORITY	
6. ISSUED BY Director, Purchasing and Contracting (DOC) 1/91st MECH INF Fort Stewart, GA 31314			7. ADMINISTERED BY (if other)			8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR NAME AND ADDRESS BALDINO MICROFILMS INC P.O. BOX 4276 DENVER, CO 80223			FACILITY			10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHED		11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
14. SHIP TO CODE POST LIBRARY BLDG, 231 FORT STEWART, GA 31314			15. PAYMENT WILL BE MADE BY CODE FINANCE OFFICE ATTN: COMMERCIAL VENDOR SERVICES FORT STEWART, GA 31314			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15			
16. TYPE OF ORDER		<input checked="" type="checkbox"/> DELIVERY/ CALL <input type="checkbox"/> PURCHASE		This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your _____ furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.					
NAME OF CONTRACTOR		SIGNATURE		TYPED NAME AND TITLE		DATE SIGNED (YYYYMMDD)			
If this box is marked, supplier must sign Acceptance and return the following number of copies:									
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE 202011D11 A2ABM 131079QPPW 257H 4321008482 534030 \$1,000.00									
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICES			20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT		
001	NEW YORK TIMES MICROFICHE ** 12 issues FROM CONTINUATION SHEET Advanced payment is authorized for periodicals and other subscription items. Contractor will be paid upon submission of proper invoice. Invoice must state (1) start and end dates (2) orders will be placed in effect upon receipt of payment. /////PAYMENT DUE DATE: 10 FEB **/////			1	YR	1,000.00	1,000.00 0.00 0.00		
*If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA BY: D. N. SULLIVAN		25. TOTAL 1,000.00		26. DIFFERENCES	
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED:									
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE 				c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE			
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE				28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS INT	
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FINAL		32. PAID BY Finance Office Fort Stewart GA 31314 DSSN: 6348		33. AMOUNT VERIFIED CORRECT FOR 1,000.00	
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.									
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER J. R. RICHARDSON/LTC,FC							
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER	
								42. S/R VOUCHER NO.	

RECEIVED IN FO
COMMERCIAL VENDOR SERVICES
20 JAN **

BALDINO MICROFILMS INC
P.O. BOX 4276
DENVER COLORADO 80223

INVOICE NUMBER
109657

DATE
28 JANUARY **

ORDER NUMBER
DABT15-**-M-5234

BILL TO
DEPARTMENT OF THE ARMY
CVS CLEARING CELL
FORT STEWART, GA 31314

TERMS
Orders will be placed in effect for
the addressee upon receipt of payment

PERIOD OF SUBSCRIPTION: MAR **- FEB**

RECEIVED IN FO
COMMERCIAL VENDOR SERVICE
31 JAN **

DESCRIPTION	DELIVERY SCHEDULE	TOTAL COST
NEW YORK TIMES Microfiche **	12 ISSUES	\$1,000.00
TOTAL DUE THIS BILL:		\$1,000.00