

# The City of Oklahoma City Trust

UNIFORM VOUCHER and INVOICE for  
CONSTRUCTION SERVICES

## CONTRACTOR

Name \_\_\_\_\_

Remit Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tax ID Number \_\_\_\_\_

Project No. \_\_\_\_\_ Title: \_\_\_\_\_

Location: \_\_\_\_\_

Supervisory Architectural and/or Engineering Firm: \_\_\_\_\_

### AMENDMENT / CHANGE ORDER SUMMARY

No. / Date	Additions	Deletions
	+	( )
	+	( )
	+	( )
	+	( )
	+	( )
	+	( )
	+	( )
	+	( )
TOTAL	+	( )

Net Change (Enter Amount Here and Line 2)\$ \_\_\_\_\_

### CONTRACTOR'S AFFIDAVIT

The undersigned Contractor, of lawful age, being first sworn, on oath, certifies that this invoice is true and correct. Affiant further states that the work, services and/or materials as shown by this invoice have been completed or supplied in accordance with the Contract Documents, orders or requests furnished the Affiant. Affiant further states that (s)he has made no payment, nor given or agreed to pay or give, directly or indirectly, to any elected official, officer, or employee of the City of Oklahoma City, the Trust or the I-89 School District to which this invoice is submitted, of money or any other thing of value to obtain payment of this invoice or procure the contract pursuant to which this invoice is required.

By: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public \_\_\_\_\_

Commission # / Expiration: \_\_\_\_\_

### THIS SPACE FOR CITY / TRUST USE

Payment Voucher No. \_\_\_\_\_

Vendor No. \_\_\_\_\_

PO No. \_\_\_\_\_ RC No. \_\_\_\_\_

Final Payment: Yes \_\_\_\_\_ No \_\_\_\_\_

Final Acceptance Date: \_\_\_\_\_

Date of Invoice: \_\_\_\_\_

For Services From: \_\_\_\_\_

For Services To: \_\_\_\_\_

Payment Application No. \_\_\_\_\_

Contract No. \_\_\_\_\_

### CONTRACTOR'S INVOICE

- Original Contract Sum.....\$ \_\_\_\_\_
- Net Change .....\$ \_\_\_\_\_
- Contract Sum to Date (Lines 1 and 2).....\$ \_\_\_\_\_
- Total Completed and Stored to Date \* .....\$ \_\_\_\_\_
- Retainage  
\_\_\_\_\_% of Line 4.....\$ \_\_\_\_\_
- Total Earned Less Retainage.....\$ \_\_\_\_\_
- Less Previous Payments .....\$ \_\_\_\_\_
- CURRENT PAYMENT DUE .....\$ \_\_\_\_\_

\* Attach supporting detail

### SUPERVISOR'S CERTIFICATE FOR PAYMENT

Amount Certified \$ \_\_\_\_\_

Attach explanation if amount certified differs from the amount requested.

The undersigned Architect, Engineer or supervisory official, of lawful age, being first duly sworn, on oath, certifies that the work for which payment is invoiced has been performed, that the work has progressed as indicated, the quality of the work is in accordance with the Contract Documents and the Contractor is entitled to payment of the amount certified.

By: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public \_\_\_\_\_

Commission # / Expiration: \_\_\_\_\_

### THIS SPACE FOR CITY/TRUST ONLY

Department Representative \_\_\_\_\_

OP Unit \_\_\_\_\_

Project Unit \_\_\_\_\_

Amount paid this Fund \$ \_\_\_\_\_

Other Accounts 1) \_\_\_\_\_ 2) \_\_\_\_\_

### APPROVALS:

Consultant/City Project Mgr. \_\_\_\_\_ / \_\_\_\_\_

Date: \_\_\_\_\_

# UNIFORM VOUCHER AND INVOICE FOR CONSTRUCTION SERVICES

## INSTRUCTIONS TO CONTRACTOR

### CONTRACTOR INVOICES

1. **All invoices** must be typewritten or completed **legibly** in ink. **Supporting detail** must be on the **claimant's letterhead** and have the claimant's name, address, and phone number **matching what is on the vendor registration**, as well as the **project number** and **contract number**.
2. Submit an original uniform voucher/invoice form for **each individual project number**.
3. **Claimant Spaces**. Enter all required information in left and right-hand columns across the top of the page. **Do not** make any entries in the areas at the top labeled **"This Space for City/Trust Use"**.
4. **Contractor Spaces**. Enter all the required information in the left and right-hand columns across the top of the page. **Do not** make any entries in the areas at the top and bottom labeled **"The Space for City/Trust Use"**.
5. **Amendment/Change Order Summary**. List all Amendments and/or Change Orders by number and date and enter the amount of each in the proper column. Enter the total of each column. Enter the net change on the **"Net Change"** line **and** on **Line 2** in the **"Contractor's Invoice"** section. (if more room is needed, put the most recent on the front page and add separate sheet along with supporting detail)
6. **Contractor's Invoice**. Enter **all required information** to give a full and true statement of the payments and retainage under your contract to date. (if more room is needed, put the most recent and add separate sheet with supporting detail)
7. **Supporting Detail**. As **required by your contract** and the City's **"Standard Specification for the Construction of Public Improvements"** must be **submitted with the invoice**. Supporting detail must be on the **Contractor's letterhead** and have the Contractor's name and address **matching what is on the current vendor registration**.
8. Forward the **completed, notarized and executed invoice** to the Architect and/or Engineer for execution of the **Supervisor's Certificate** for payment. For projects for which there is no outside architect and/or Engineer, invoices and supporting detail may be forwarded directly to the **City/Trust Project Manager by E-Mail**.
9. The Architect and/or Engineer is responsible for reviewing the invoice, questioning and correcting any exceptions, **executing and notarizing** the Supervisor's Certificate for Payment and forwarding the invoice and supporting detail to the appropriate City/Trust or the Project Manager by E-Mail.

### DIRECTIONS TO CITY STAFF

1. Submit an original uniform voucher/invoice form for each individual project number.
2. Trust Line. If the contract under which the invoice is being submitted was awarded by a Trust, write the name of that Trust on the "Trust" line in the upper left-hand corner of the document.
3. Examine and verify the invoice and supporting detail.
4. Enter the required information at the top right and the bottom of the page. The Account Information will be different for each form for an invoice with multiple funding sources.
5. For invoices to be paid from multiple funding sources, process a form for each source. Put the amount to be paid from each source at the bottom right on the "Amount paid this Fund" line. Enter the account number(s) from which the remainder of the invoice will be paid. Be sure to note the PO and receiver number on the invoice/claim form in the top right of the form.
6. Obtain the necessary approval signatures.
7. Attach supporting detail to original and forward for processing. Invoices to be paid from two (2) or more funding sources must be forwarded together.
8. City Project Manager to sign at the bottom left **after** verifying all pertinent information and matching supporting documentation and has been provided and is in the proper spaces on form before sending to financial staff for processing.
9. Finance staff sign on Department Representative line to finalize the claim.