

**CONSTRUCTION CONTRACTOR'S
INVOICE**

OFFICIAL DATE OF RECEIPT BY GOVERNMENT

Contractor's Name and Address (As shown on Contract)

For FLETC Use Only

CONTRACTOR MUST ALSO COMPLETE CERTIFICATION ON REVERSE OR PAYMENT WILL NOT BE MADE

Contract No. _____ Invoice No. _____ Invoice Date _____

Delivery Order No. _____ Work Order No. _____

Total Contract Amount _____ Through Change Order No. _____ Dated _____

Value of Work Completed _____

Total of Prior Invoices _____

Amount of this Invoice _____

Signature and Title _____
(Authorized Contractor Representative)

GOVERNMENT CERTIFICATION OF INVOICE

Date _____

FROM: Contracting Officer's Technical Representative (COTR)

THRU: (1) Chief, Design-Construction Branch (FMD/D-CB)

(2) Contracting Officer (PRO/CCB)

TO: Budget and Finance Division (BFD/FIN)

CONTRACT WORK CERTIFIED COMPLETE

\$ _____

LESS: Retention \$ _____

Previous Payments \$ _____

Other (Deductions) \$ _____

Liquid Damages @ \$ _____/day X _____ Days = \$ _____

AMOUNT CERTIFIED FOR PAYMENT

\$ _____

Remarks:

Evaluated

By: _____

COTR/PM (FMD)

Reviewed

By: _____

Chief, Design/Construction Branch (FMD)

Payment

Approved

By: _____

Contracting Officer (PRO/CCB)