



CONSULTANT CONTRACT STANDARD INVOICE

Cost Plus Fixed Fee - Burdened Rate - Lump Sum

WORKBOOK GUIDE

(Microsoft Excel 2002)

EACH INVOICE SUBMITTED MUST:

1. CONTAIN DATA FOR ONE CONTRACT ONLY, INCLUDING MULTI-PIN DETAIL AS APPROPRIATE.
2. CONTAIN A "CONSULTANT INVOICE NUMBER" THAT IS UNIQUE TO THAT FIRM AND CONTRACT WITH NO MORE THAN 12 CHARACTER FIELDS USED (including punctuation and spaces).
3. INCLUDE SHEET 4 OF 5, SUBCONSULTANT DBE/WBE DETAIL, EVEN IF TOTALS ARE ZERO.
4. **INCLUDE THE SAME SUPPORTING INFORMATION ATTACHED TO THE INVOICE AS IN THE PAST.**

1) Yellow and tan colored cells are for data entry. Tan cells will need review or update with each invoice submitted, many yellow cells should only require data entry with the first invoice for a contract. Data for blue colored cells is derived by formula, or by link from another cell in the workbook.

2) It is suggested that you begin with Sheet 2 of 5 Contract Data, adding Company and Contract information. Be sure to determine which "Yes/No" question in the upper left corner applies to your contract (Lump Sum contracts may have 2 yes answers). This determines which Summary Sheet (1A, 1B, or 1C) is filled with data. Sheet 3 of 5, Direct Labor Detail and Sheet 4 of 5, Sub consultant Detail should be self explanatory. Finally, Sheet 5 of 5 breaks down invoice costs by MaineDOT PIN, including direct expense detail if appropriate. Totals from this Sheet are fed back to the appropriate Sheet 1; if they don't match direct labor and sub consultant data on Sheets 3 and 4 then an "Error" message appears.

3) Sheet 2 of 5, top right side, "Final Invoice?", must indicate either "yes" or "no" and should not be left blank. This not only aids processing, but also provides critical data for formulas and cells on other sheets.

4) The Workbook does not include an entry anywhere for the amount of Contract Fixed Fee being invoiced. Sheet 2 of 5 Contract Data does require entry of the percentage of total contract fixed fee earned to date (% Complete To Date), in order to calculate the amount of fixed fee due on each invoice.

5) Overhead amounts are listed but not calculated by formula on Sheet 2 of 5 Contract Data. This prevents rounding differences with local software programs. The cells are not protected, so formulas to calculate these values line by line can be inserted if desired.

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WORKBOOK GUIDE - Continued

(Microsoft Excel 2002)

6) **Sheet 3 of 5** does not require data for Lump Sum contracts unless you are submitting a final invoice.

7) **Sheet 4 of 5, Subconsultant Detail**, must always be completed whenever subconsultants are used, even with Lump Sum contracts.

8) **Sheet 1C of 5** (Lump Sum) will show only a summary of labor, overhead and profit or lump sum costs with each invoice up to the final invoice. Final invoice submittal requires labor, overhead and profit breakdowns for the entire contract (See Note #9 below).

9) An additional **Sheet 1CF of 5** (Lump Sum) has been added to summarize **labor, overhead and profit total effort values for the entire contract at final invoice**. These values are to be reported in detail on Sheets 2-5 as appropriate when submitting a Lump Sum final invoice.

10) **All Sheets** are password protected, but **Sheet 3 of 5** does allow local sorting of fields such as name and PIN.

11) The MaineDOT PIN field is preformatted to produce an 8 digit number in decimal format. Do not enter a decimal point. The last 2 digits entered must be the 2 digits to the right of the decimal (even zeros), but no decimal should be shown. Do not enter leading zeros.

12) The payment address can be entered directly on Sheet 1 if it is different than the firm address entered on Sheet 2. **It is very important that the Vendor/Customer # entered on Sheet 2 (if your firm has more than one) be the number associated with your desired payment address.**

13) Comment boxes have been added to a number of data entry fields to help clarify input intentions, or identify specific needs in those cells.

14) Function and Activity coding for PIN lines on **Sheet 5 of 5** is not mandatory to submit a completed invoice, but should be entered if known, especially for multiPIN projects.

15) A column has been added on the right side of Sheet 2 to allow for adjustments to contract totals when changes are made to contract overhead amounts. If the Firm's overhead rate changes during the life of the contract, but the total contract amount does not and no other off-setting adjustments are made to the remaining contract cost components; then an off-setting value is needed in this column; in order to produce the correct contract value on Sheet #1. The new overhead rate (%) should be added to a Mod. line on Sheet #2 along with the changes (+ or -) in overhead amounts. If the total for that line in Column P is positive, then an equal negative amount is needed in Column Q and visa-versa.

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WORKBOOK GUIDE - Continued

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16) Changes have been made to the invoice workbook, allowing calculation of a fee amount only, without the usual labor and overhead, if a contract reaches 100% complete with less than 100% of contract labor & overhead amounts being invoiced.

17) Changes have been made to the invoice workbook that will allow credits or adjustments to a final invoice. These changes are on Sheet #1 and provide for data entry detailing needed adjustments just above "Total Amount Due This Invoice". **Invoice adjustments of this nature are not frequent and should only be used when developing a final invoice. If not a final invoice and an adjustment is needed please add line(s) to Sheets 3, 4 and/or 5 introducing the adjustment needed.**

Payment Type:
* Cost Plus Fixed Fee

State of Maine Department of Transportation
Transportation Building 16 State House Station
Augusta, Maine 04333-0016

****In Account With****

Street (PO Box)	<= Firm Name
Town, State ZIP	<= Payment mailing address

Vendor/Customer # =>

P.V. #:	
CT #:	
CSN #:	
Vendor/Customer #:	
TEDOCS #:	
Doc. Date:	
Doc. Type:	
OUC:	
Author:	

Consultant Invoice Number:
 Invoice Period:
 State Contract Number:
 Project Contract Award Date:
 Project Contract Completion Date:

Invoice Date:
 Consultant Project #:
 MaineDOT PIN:
 Project Name:

COMMENT:

I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. **Initials:** _____

Signed: <input style="width: 200px;" type="text"/> Please Type: Name, Title	Amount Invoiced This Period	Total Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance
Straight Direct Labor =					
Straight Time Overhead =					
Overtime Direct Labor =					
Overtime Overhead =					
Sub Total Direct Labor + Overhead =					
Fixed Fee =					
Sub-Total: DL + OH + Fee =					
Direct Expenses (see Sheet 5 of 5 for detail) =					
Subconsultant Summary: DBE/WBE => yes/no					
<input style="width: 200px; height: 150px;" type="text"/>					
Total Subconsultants =					
Total Invoice Amounts =					
Final Invoice Credits/Adjustments =					
Detail:	1) <input style="width: 150px;" type="text"/>				
	2) <input style="width: 150px;" type="text"/>				
	3) <input style="width: 150px;" type="text"/>				
TOTAL AMOUNT DUE THIS INVOICE =					

Approved by:
 MaineDOT Program/Project Manager Date
 (Work performed as specified)

State of Maine Department of Transportation
 Transportation Building 16 State House Station
 Augusta, Maine 04333-0016

Payment Type:

- * Burdened Hourly Rate
- * Cost per Unit of Work

****In Account With****

Street (PO Box)	<= Firm Name
Town, State ZIP	<= Payment mailing address

Vendor/Customer # =>

P.V. #:	
CT #:	
CSN #:	
Vendor/Customer #:	
TEDOCS #:	
Doc. Date:	
Doc. Type:	
OUC:	
Author:	

Consultant Invoice Number:

Invoice Period:

State Contract Number:

Project Contract Award Date:

Project Contract Completion Date:

Invoice Date:

Consultant Project #:

MaineDOT PIN:

Project Name:

COMMENT:

I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: _____

Signed:

Please Type: **Name, Title**

	Amount Invoiced This Period	Total Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance
Straight Direct Labor =					
Straight Time Overhead =					
Overtime Direct Labor =					
Overtime Overhead =					
Sub Total Direct Labor + Overhead =					
Profit =					
Sub-Total: DL + OH + Profit =					
Direct Expenses (see Sheet 5 of 5 for detail) =					
Subconsultant Summary: DBE/WBE => yes/no					
Total Subconsultants =					
Total Invoice Amounts =					
Final Invoice Credits/Adjustments =					
1) <input style="width: 150px;" type="text"/>					
2) <input style="width: 150px;" type="text"/>					
3) <input style="width: 150px;" type="text"/>					
TOTAL AMOUNT DUE THIS INVOICE =					

Approved by:

MaineDOT Program/Project Manager Date

(Work performed as specified)

State of Maine Department of Transportation
 Transportation Building 16 State House Station
 Augusta, Maine 04333-0016

Payment Type:
 * Lump Sum

P.V. #:	
CT #:	
CSN #:	
Vendor/Customer #:	
TEDOCS #:	
Doc. Date:	
Doc. Type:	
OUC:	
Author:	

****In Account With****

Street (PO Box)	<= Firm Name
Town, State ZIP	<= Payment mailing address

Vendor/Customer # => _____

Consultant Invoice Number: _____
 Invoice Period: _____
 State Contract Number: _____
 Project Contract Award Date: _____
 Project Contract Completion Date: _____

Invoice Date: _____

Consultant Project #: _____
 MaineDOT PIN: _____
 Project Name: _____

COMMENT:

I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. **Initials:** _____

Signed: _____
 Please Type: **Name, Title**

	Amount Invoiced This Period	Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance
Lump Sum To Date =					
Direct Expenses (see Sheet 5 of 5 for detail) =					
Subconsultant Summary: DBE/WBE => yes/no					
Total Subconsultants =					
Total Invoice Amounts =					
TOTAL AMOUNT DUE THIS INVOICE =					

Approved by: _____
 MainesDOT Program/Project Manager
 (Work performed as specified) _____ Date

State of Maine Department of Transportation
 Transportation Building 16 State House Station
 Augusta, Maine 04333-0016

Payment Type:
 * Lump Sum

P.V. #:	
CT #:	
CSN #:	
Vendor/Customer #:	
TEDOCS #:	
Doc. Date:	
Doc. Type:	
OUC:	
Author:	

****In Account With****

FINAL INVOICE

Street (PO Box)		<= Firm Name
Town, State ZIP		<= Payment mailing address

Vendor/Customer # => _____

Consultant Invoice Number: _____	Invoice Date: _____
Invoice Period: _____	
State Contract Number: _____	Consultant Project #: _____
Project Contract Award Date: _____	MaineDOT PIN: _____
Project Contract Completion Date: _____	Project Name: _____

COMMENT: _____

I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: _____

Signed: _____
 Please Type: **Name, Title**

	Amount Invoiced This Period	Amount Previously Invoiced	Total Contract Effort	Contract Amounts	Contract Balance
Lump Sum Final Invoice =					
Final Invoice Detail:					
Straight Direct Labor =					
Straight Time Overhead =					
Overtime Direct Labor =					
Overtime Overhead =					
Sub Total Direct Labor + Overhead =					
Profit =					
Sub-Total: Lump Sum =					
Direct Expenses (see Sheet 5 of 5 for detail) =					
Subconsultant Summary: DBE/WBE => yes/no					
Sub-Total: Subconsultants =					
Total Invoice Amounts =					
Final Invoice Credits/Adjustments =					
Detail:					
1) _____					
2) _____					
3) _____					
TOTAL AMOUNT DUE THIS INVOICE =					

Approved by: _____
 MaineDOT Program/Project Manager _____ Date _____
 (Work performed as specified)

CONSULTANT LETTERHEAD

Maine Department of Transportation - Standard Invoice

Invoice Date:

DIRECT LABOR DETAIL

Consultant Name:
 Vendor/Customer #:
 Consultant Invoice Number:
 Invoice Period:
 State Contract Number:
 Contract Award Date:
 Contract Completion Date:

Consultant Project #:
 MaineDOT PIN:
 Project Title/Location:

Summary of Direct Labor:

NAME	Individual TITLE	MaineDOT PIN	Straight Direct Labor			Overtime Direct Labor			TOTAL Labor Amount
			Time Unit	THIS INVOICE		Time Unit	THIS INVOICE		
				Rate	Amount		Rate	Amount	
Name 1	Title 1	000000.00	0.000	0.0000		0.000	0.0000		
Name 2	Title 2								
Name 3	Title 3								
Name 4	Title 4								
Total Direct Labor =									

CONSULTANT LETTERHEAD

Invoice Date:

Maine Department of Transportation - Standard Invoice

SUB CONSULTANT DETAIL

Consultant Project #:
 MaineDOT PIN:
 Project Title/Location:

Consultant Name:
 Vendor/Customer #:
 Consultant Invoice #:
 Invoice Period:
 Contract Number:
 Contract Award Date:
 Contract Complete Date:

Summary of DBE/WBE Participation:

<u>DBE/WBE - yes/no =></u>	Amounts This Invoice							Invoice Sub Total DBE/WBE Subs Only #1-7	Invoice Sub Total All Subs #1-7
	Subconsultants #1 - #7 MaineDOT PIN	Name Sub #1	Name Sub #2	Name Sub #3	Name Sub #4	Name Sub #5	Name Sub #6		
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #1 - #7									
Previously Invoiced									
Total Subconsultant Contract Amount									
Subcontract Balance									

Invoice Totals Subconsultants #1- #14

Total Contract Amount =

	<u>Value</u>	<u>Percentage</u>	
DBE Subconsultant Contract Amount =		#DIV/0!	of Contract
DBE Subconsultant Program Commitment =			of Program
Accrued Contract Billings to Date =		#DIV/0!	of Contract
Accrued DBE Billings to Date =		#DIV/0!	of DBE Amount

