Monthly Invoicing

Instructions
Monthly Processing of Invoices

- Invoices are to be received before the 10th of each month. (For example, January’s invoices are to be received by February 10th)
Vendors are required to submit the following each month:

- Part A (summarization of the services – no client names listed on Part A)
- Part B (each client with services listed)
- Monthly Treatment Report for each client
- Daily Log containing services received, time in/out, client and vendor initials
- Receipts (Copayments/bus passes, etc.)
- Central Specimen Log
Program Plan

- Bill only those services and quantities authorized on Program Plan (Form 45)
- Pay special attention to Effective Dates on the Program Plans
Daily Log

- Transfer services provided on the Daily Log to Part B of the invoice. The counselor will also pull the services from the Daily Log and list on the Monthly Treatment Report (MTR).
- Daily Logs may be handwritten
## Daily Log (Example)

**John Doe**  
**June 2008**

<table>
<thead>
<tr>
<th>Date of Service</th>
<th>Type of Service Provided</th>
<th>Time In</th>
<th>Client Initials</th>
<th>Time Out</th>
<th>Client Initial</th>
<th>Vendor Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/01/08</td>
<td>UA – 1010</td>
<td>1:00 pm</td>
<td>JD</td>
<td>1:10 pm</td>
<td>JD</td>
<td>lmg</td>
</tr>
<tr>
<td>06/03/08</td>
<td>1010</td>
<td>2:15 pm</td>
<td>JD</td>
<td>2:18 pm</td>
<td>JD</td>
<td>lmg</td>
</tr>
<tr>
<td>06/03/08</td>
<td>2010</td>
<td>2:30 pm</td>
<td>JD</td>
<td>3:30 pm</td>
<td>JD</td>
<td>lmg</td>
</tr>
<tr>
<td>06/10/08</td>
<td>Group – 2020</td>
<td>7:00 pm</td>
<td>JD</td>
<td>9:00 pm</td>
<td>JD</td>
<td>gml</td>
</tr>
</tbody>
</table>
### Part B (Example)

<table>
<thead>
<tr>
<th>Client Name</th>
<th>Client Number</th>
<th>Date of Service</th>
<th>Project Code</th>
<th>Quantity (Units)</th>
<th>Unit Price</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe</td>
<td>15555</td>
<td>06/01/08</td>
<td>1010</td>
<td>1</td>
<td>10.00</td>
<td>10.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/03/08</td>
<td>1010</td>
<td>1</td>
<td>10.00</td>
<td>10.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/03/08</td>
<td>2010</td>
<td>2</td>
<td>10.00</td>
<td>20.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/10/08</td>
<td>2020</td>
<td>4</td>
<td>10.00</td>
<td>40.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/10/08</td>
<td>Copay</td>
<td></td>
<td></td>
<td>20.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/10/08</td>
<td>1501</td>
<td></td>
<td></td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
<td>61.00</td>
</tr>
<tr>
<td>Jane Doe</td>
<td>15561</td>
<td>06/05/08</td>
<td>1010</td>
<td>1</td>
<td>10.00</td>
<td>10.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
<td>10.00</td>
</tr>
</tbody>
</table>
Part A (Example)

(PART A)

1. Judicial District: Oklahoma Western
2. Vendor: Your Vendor Name
   Address: Vendor Address
   Telephone: Phone Number

Vendor’s Certification: I certify that all expenditures and requests for reimbursement in this voucher are accurate and correct to the best of my knowledge and include only charges for services actually rendered to clients under the terms of the agreement and for which no other compensation has been received from sources other than the United States District Court.

___________________________________
Authorized Administrator

6. PROJECT CODE 7. QUANTITY(Units) 8. UNIT PRICE 9. TOTAL PRICE

<table>
<thead>
<tr>
<th>PROJECT CODE</th>
<th>QUANTITY</th>
<th>UNIT PRICE</th>
<th>TOTAL PRICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1010</td>
<td>3</td>
<td>10.00</td>
<td>30.00</td>
</tr>
<tr>
<td>2010</td>
<td>2</td>
<td>10.00</td>
<td>20.00</td>
</tr>
<tr>
<td>2020</td>
<td>4</td>
<td>10.00</td>
<td>40.00</td>
</tr>
</tbody>
</table>

Total Copayment (insert minus sign before total) -20.00
1501 Admin. Fee 1.00
(5% of total copay) TOTAL FOR REIMBURSEMENT 71.00
Monthly Treatment Report

- Make sure all services are listed from the Daily Log.
- The MTR needs to be typed and signed by the counselor.
- Remarks by counselor should include client’s adjustment, responsiveness, and significant problems. Comments should not only note attendance and participation.
Common Errors

- Charging for no shows
- Charging for stalls or insufficient quantities on UAs
- Charging for both application and removal of the sweatpatch (only bill upon removal)
- Not charging correct unit amounts (1 unit = ½ hour; 2 units = 1 hour)
- Putting Pretrial clients on the Probation invoice
- No original signature on invoice
- Not providing all documentation with invoice
- Charging the incorrect unit price (See Order for Supplies or Services for correct prices)
- Multiplication errors
Contact Person

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