U.S. GOVERNMENT

PURCHASE ORDER—INVOICE—VOUCHER

DATE OF ORDER | ORDER NO.

PRINT NAME AND ADDRESS OF SELLER (*Number, Street, City, and State*)*

PAYEE

FURNISH SUPPLIES OR SERVICES TO (*Name and address*)*

SUPPLIES OR SERVICES	QUANTITY	UNIT PRICE	AMOUNT

SPECIMEN

AGENCY NAME AND BILLING ADDRESS*

PAYOR

TOTAL

DISCOUNT TERMS

..... % ..... DAYS

DATE INVOICE RECEIVED

ORDERED BY (*Signature and title*)

PURPOSE AND ACCOUNTING DATA

PURCHASER—*To sign below for over-the-counter delivery of items*

RECEIVED BY

TITLE | DATE

SELLER—*Please read instructions on Copy 2*

☐ PAYMENT RECEIVED $..... ☐ PAYMENT REQUESTED $.....

NO FURTHER INVOICE NEED BE SUBMITTED

SELLER | DATE

BY ..... (*Signature*)

INSTRUCTIONS TO SELLER

After satisfactory identification of the Government representative presenting this purchase order, verify the itemization, including quantity, unit price, amount, total and discount sections.

This form is so designed that Copy 1 may be used as a cash payment receipt or as your invoice by completing, as appropriate, either the Payment Received or Payment Request blocks and signing the Seller Section.

If you would rather submit your own invoice, DO NOT SIGN COPY 1, but attach it unsigned to your invoice to expedite verification and processing for payment.

2. SELLER'S COPY OF ORDER

STANDARD FORM 44b (Rev. 10-83)
PRESCRIBED BY GSA
FAR (48 CFR) 53.213(c)

U.S. GOVERNMENT

PURCHASE ORDER—INVOICE—VOUCHER

DATE OF ORDER | ORDER NO.

PRINT NAME AND ADDRESS OF SELLER (*Number, Street, City, and State*)*

PAYEE

FURNISH SUPPLIES OR SERVICES TO (*Name and address*)*

SUPPLIES OR SERVICES	QUANTITY	UNIT PRICE	AMOUNT

SPECIMEN

AGENCY NAME AND BILLING ADDRESS*

PAYOR

TOTAL

DISCOUNT TERMS

..... % ..... DAYS

DATE INVOICE RECEIVED

ORDERED BY (*Signature and title*)

PURPOSE AND ACCOUNTING DATA

PURCHASER—*To sign below for over-the-counter delivery of items*

RECEIVED BY

TITLE | DATE

SELLER—*Please read instructions on Copy 2*

☐ PAYMENT RECEIVED $..... ☐ PAYMENT REQUESTED $.....

NO FURTHER INVOICE NEED BE SUBMITTED

SELLER | DATE

BY ..... (*Signature*)

REMARKS | DIFFERENCES

ACCOUNT VERIFIED

CORRECT FOR

BY

3. RECEIVING REPORT—ACCOUNTING COPY

STANDARD FORM 44c (Rev. 10-83)
PRESCRIBED BY GSA
FAR (48 CFR) 53.213(c)