



**MANUAL ON SUBMITTING VOUCHER  
PAYMENTS FOR PROFESSIONAL  
SERVICES AGREEMENTS**



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FOR PROFESSIONAL SERVICES AGREEMENTS**

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Gabe Klein  
Commissioner

## SECTION 1 DEFINITIONS

THE FOLLOWING WORDS AND PHRASES HAVE THE FOLLOWING MEANINGS FOR PURPOSES OF THIS MANUAL.

1. **“Blanket Purchase Order”**: A contract with negotiated pricing and a defined term in which there is no obligation to purchase any specified quantity.
2. **“Standard Purchase Order”**: A contract in which all details such as cost, quantity, terms and funding are known (standard purchase order is for a specific project).
3. **“Amendment”**: A modification to a blanket P.O. or standard purchase order to increase the contract value, change in scope of services, or the addition of vendors and/or sub consultants that were not originally part of the Agreement.
4. **“Supplement”**: An increase in funding to the release for continuation of services to a project notice.
5. **“Release”** or **“City of Chicago Blanket Release”** or **“Sub-Order”**: An actual order, specifying quantities and delivery requirements, issued against a Blanket Purchase Order.
6. **“Voucher Form for Professional Services”**: A five (5) part carbonless form, provided by the Chicago Department of Transportation (CDOT), filled-out by the Consultant and used in conjunction with additional documents provided by the Consultant for request of payment for services rendered.
7. **“Vendor Code”**: The specific generated number that uniquely identifies a supplier within (FMPS) Financial Management and Purchasing System.
8. **“Back-up”**: Receipts, expense reports, time sheets, mileage reports, and/or documentation authorizing travel or purchase of equipment by CDOT.
9. **“Contract Number”** (aka PO number): The specific number issued by the Department of Procurement Services for identification of a Consultant’s agreement.
10. **“C.D.O.T. Project Number”**: The assigned alphanumeric numbers issued by the Chicago Department of Transportation’s Project Managers in relation to a specific task.
11. **“Project Notice”** or **“Task Order”**: The Specific individual task with respect to the Blanket Agreement, assigned to the Consultant by CDOT’s Project Mangers.



## INTRODUCTION

It is the experience of the Chicago Department of Transportation (CDOT) that the cause of delays in paying invoices submitted by consultants or vendors is mainly due to lack of (or insufficient) documentation, incorrect calculations, assigning incorrect Purchase Order number, CDOT project or fund numbers, etc. Most of these problems can be eliminated or at least minimized, in order to expedite payments, if all individuals involved in the process are made aware of the correct procedure in which a voucher for professional services is expected to be assembled for processing and ultimate payment by the City Comptroller. Professional vouchers that are correctly assembled, not only expedite bill payment, they also minimize chances of overpayment or underpayment. Overpayment or underpayment is usually detected as a result of the City/IDOT review that is normally conducted sometime after the project completion.

These instructions have been put together to clarify the procedure for preparing a professional voucher for processing. The suggestions given here are a guide toward efficient preparation of payment vouchers and are subject to change. It should be understood that if any of these suggestions appear to be in conflict with contract documents or any other Department or City Chief Procurement Officer's requirements, the latter provisions should take precedence.

It is our belief that if all our consultants routinely follow all of these requirements in preparing their professional services vouchers, their invoices will be paid more efficiently by eliminating or minimizing the auditing problems. We further advise that when in doubt concerning these procedures, consultants are advised to contact the Department for clarification.

## **IMPORTANT**

Consultant must submit **monthly** invoices to CDOT, 30 N. LaSalle, Suite 600, Record & Estimate Section for labor and other direct and indirect costs as billed.

- Cumulative monthly invoices will be rejected
- If consultant has more than one agreement with CDOT, consultant must prepare and submit separate invoices for each agreement.
- Consultant must not submit invoices for less than **\$500** unless a particular invoice is for the last payment prior to closeout of the contract.



### **SECTION 3**

#### **REQUIRED FORMS / DOCUMENTS FOR SUBMITTAL**

Please be advised that all required forms and supporting documentation should be submitted in the order listed below.

1. **CDOT Voucher Form (See Section 4 and Appendix I)**
2. **Copy of the City of Chicago Blanket Release (See Appendix IV)**
3. **Subcontractor Payment Instructions/Certification-Compliance copy Form (See Appendix V, VI & VII)**
4. **Invoice Summary (See Section 5 and Appendix II)**
5. **Detailed Billing Information (See Section 6 and Appendix III)**
6. **Supporting Detailed Documentation (See Section 6 and Appendix VIII & Appendix IX)**
7. **Sub-Consultants Invoice (if applicable)**

Once each month, Consultant must submit to the City an invoice for Services performed during the preceding month. Consultant must support each invoice with reasonable detail including Sub-Consultant's costs In accordance with the terms of the Contract; Consultant must maintain complete documentation of all costs incurred for Audit.

If certain items contained in Consultants invoices are disputed by the City, the amount in question must be resolved in accordance with the Disputes Provision of Contract.

- **Please Note: Sub-Consultant Invoices should follow the same procedures/format as the Prime.**
- **Prime should include Sub-Consultant Invoices to their invoice for payment proposes.**
- **We are unable to accept Vouchers directly from the Sub-Consultants.**



## SECTION 4 FILLING-OUT THE VOUCHER FORM

1. Obtain the Voucher for Professional Services Form from the Chicago Department of Transportation, Division Administration; Records and Estimates Section (see Appendix 1.1).

The form is filled-out as follows:

- A. CONSULTANT: Name of Consulting firm.
  - B. VENDOR CODE: This code is assigned by the Department of Procurement Services. This alphanumeric assignment correlates to “pay to address”.
  - C. INVOICE NO.: This is for the Consultant’s use.
  - D. PAYMENT NO.: This number is sequential against the Agreement Number
  - E. CONTRACT NO.
  - F. SERVICES PERFORMED: The period the Consultant provided the services, e.g., (labor charges).
  - G. PROJECT NUMBER: Provided by CDOT’s Divisional Project Manager.
  - H. CDOT PROJECT MANAGER: Name of CDOT personnel managing the project.
  - I. WORK ORDER NO: Provided by CDOT’s Divisional Project Manager.
  - J. PROJECT DESCRIPTION
  - K. RELEASE # (also known as SUB-ORDER): Provided by the contract section.
  - L. AMOUNT OF BASIC CONTRACT SERVICES: Is the “Maximum Compensation Limit” for the entire agreement.
  - M. CONTRACT CEILING INCLUDING MOD: Fill-Out same amount as item “L” above.
  - N. AMOUNT OF CURRENT INVOICE: All charges including Prime’s and Sub’s.
  - O. AMOUNT INVOICED TO DATE INCLUDING CURRENT INVOICE: This is the cumulative totals that have been invoiced.
  - P. INVOICE DATE: “ Please leave this blank”
  - Q. NAME OF CONSULTANT: Same as item “A” above.
  - R. OFFICIAL SIGNATURE & TITLE Date: Authorized official of the firm.
2. **PLEASE RETURN ALL FIVE (5) PARTS OF THE CDOT VOUCHER FORM**



## SECTION 5 ITEMS TO INCLUDE IN INVOICE SUMMARY

The Invoice summary (See Appendix II) must be on the Company's Letter Head with a name of a Contact Person, Direct Phone Number or Cell Number, and E-mail address, in order to answer to any questions about the submittal of the invoice. This page must also consist of the following:

- Three columns: "**Current**," "**Prior**," and "**Cumulative**."
- Purchase Order Number, Consultant's invoice and job number, project name, invoice period, agreement or task order dollar amount, remaining un-invoiced dollar amount remaining on the agreement or task order.

### 1. DIRECT SALARIES

Labor costs will consist of the actual costs of all allowable and allocable salaries and wages (exclusive of overtime premiums and payroll related taxes, insurance and fringe benefits) paid to Consultant's and Sub-Consultants' employees for the time spent in the performance of services under this Contract.

### 2. PAYROLL MULTIPLIER (Overhead and Burden)

Overhead and burden will consist of actual indirect costs of the home and branch offices of Consultant and Sub-Consultants are allowable and allocable to the Services (collectively, "Overhead").

- ### 3. MAXIMUM FIXED FEE (Profit):
- This can either be a maximum percentage rate of 10% multiplied by labor and the payroll multiplier, or a fixed fee dollar amount times the percentage of work completed.

The City will pay Consultant a fixed fee/Profit amount as an allowance for profit to be earned in the performance of services under this agreement by Consultant.

If Applicable

### 4. PREMIUM OVERTIME

To the extent that Consultant pays its employees a premium in excess of its hourly rates for overtime spent on the project, the cost of the premium will be treated as a direct cost which will not be included in Labor Cost and which will not be subject to application of any Overhead rate.

- ### 5. IN-HOUSE DIRECT COSTS:
- Such as Company Vehicle, Copies, and CADD Hours.

Direct costs are allowable and allocable to the project, are not included in Overhead, and are routinely and uniformly charged to specific projects under Consultants accounting system.



Gabe Klein  
Commissioner

6. OUTSIDE DIRECT COST: Such as FedEx, UPS, Copy Service, Personal Car Mileage & Parking
7. SUB-CONSULTANTS:  
The City will reimburse consultant for the costs of Sub-Consultants as those costs are incurred under or in connection with Subcontracts awarded by Consultant in accordance with the terms and conditions of this Contract, subject to the city's prior approval.
8. TOTAL AMOUNT EARNED TO DATE.
9. LESS PREVIOUSLY INVOICED (optional)
10. PAYMENT DUE THIS INVOICE.
11. Name of DBE/MBE/WBE firms from Contract or Task Order: Indicate type of, (i.e., DBE/MBE/WBE), agreed amount, amount paid to date (separate page at consultant's discretion).
12. CERTIFICATION STATEMENT: Should be Signed & dated.





## SECTION 6 ITEMS TO INCLUDE IN DETAILED BILLING

All the items described in Section 5 should have supporting documentation consistent with the professional consultant contract. These items should include but are not limited to:

1. **Direct Salaries:** This information should show the personnel who worked on the project during the pay period, their classification, hourly raw rate of pay and the total charge for each employee. Consultant must adhere to the classifications and rates stated in their Contract. (Exhibit 2-Attachmnet A, Maximum hourly labor rates )
2. **Labor Distribution:** Sheet(s) should contain the month with the days of the week, dates and hours employee worked on the project. In cases of where there are multiple projects on the same time sheet but with different City or other Client projects, then each project must be clearly identified by highlighting the particular project that coincides with the labor charge. (See Appendix VIII)
  - A. If the Consultant is under the Supervision, i.e. (a person performs in the field or at a CDOT office), the consultant must obtain blank time sheets from the Division which the consultant is assigned to, and labor hours logged in must be approved by a CDOT Project Manager or Supervisor. These *time sheets* or *labor distributions sheets* must be attached in order for consultants to be eligible for labor reimbursement. **Personnel hours not properly documented, will not be eligible for payment.** (See Appendix IX)
3. **Direct Costs:** All direct expenses on the project must be identified and itemized. **All corresponding receipts must be attached.** If the receipt attached represents several projects, then the items and the amounts on the receipt chargeable to the particular invoice must be highlighted. The following are some examples of direct costs:
  - A. **Cell Phones:** Cellular phones are reimbursable for City business calls only. Personal calls are not allowed. CDOT will only pay for the phone service and not the purchase of or lease of new or used equipment, e.g., (phones, batteries, charges, adapters, etc.).
    1. Invoicing: Consultant will provide copies of the back-up and indicate on the Detail Billing or separate page; the number of phones being invoiced with employee's names, and cell numbers.
    2. CDOT reserves the right to discontinue the use of cell phones.
  - B. **Auto Mileage:** Mileage reimbursement is for work purposes only. Invoicing mileage for personal use is strictly prohibited. CDOT does not reimburse consultants for commuting to and from their home(s), then to the office or work site.



Consultant must provide a travel log which indicates:

1. Month, day of the week and traveled dates
2. Speedometer's reading prior to travel and subsequent end reading
3. Total Miles traveled for each day

- C. Shipping/Messenger Services:** CDOT will only reimburse for charges that pertain to the project being invoiced and not for charges occurred on items, i.e. (Consultant or Sub Consultant invoices shipped to each other or to CDOT for processing).

Consultant must provide copies of receipts. If the consultant has an internal batching system, then the charges must identify to the project being invoiced with number of packages delivered, senders and receiver's name, delivery date, and time.

- D. Premium Overtime:** It's earned on CDOT projects and should not be associated with other outside clients.

This should be in accordance with the "Standard Terms and Conditions," Exhibit 2, paragraph 3, "Direct Costs," subparagraph F "Premium on overtime" of the agreement.

- E. Office Supplies / Field Supplies:** This indirect, non-salary cost reimbursement is part of the Consultant's business operation and should not be included in the Consultant's overhead. Invoicing for general office supplies other than for the use by field personnel is prohibited.

- F. Food / Beverages:** This is non reimbursable, unless, it is related to business travel (See Appendix X "City of Chicago Travel Guidelines").

- G. Computers, Digital Cameras, Engineering Instruments:** In some cases, CDOT may request the consultant to purchase such items. The purchase of computer equipment becomes the property of the City and must be surrendered when the Project is completed. It is the responsibility of the Consultant to keep receipts and maintain records of such equipment purchased through the Consultant's agreement. (See "Standard Terms and Conditions," Exhibit 2 Paragraph A, Item 3 "Direct Costs," Subparagraph D "Equipment, Tools and Vehicles" of the Contract.)

APPENDIX I

**CDOT VOUCHER FORM**



**NO. 0887**

**CITY OF CHICAGO DEPARTMENT OF TRANSPORTATION**  
**Suite 600, 30 North LaSalle Street Chicago, Illinois 60602-2570**  
**VOUCHER FOR PROFESSIONAL SERVICES**

CONSULTANT: \_\_\_\_\_ (A) VENDOR CODE: \_\_\_\_\_ (B)

ADDRESS: \_\_\_\_\_

INVOICE NO.: \_\_\_\_\_ (C) PAYMENT NO.: \_\_\_\_\_ (D) CONTRACT NO.: \_\_\_\_\_ (E)

SERVICES PERFORMED (Date) From: \_\_\_\_\_ (F) To: \_\_\_\_\_ PROJECT NO.: \_\_\_\_\_ (G)

CDOT PROJ. MANAGER: \_\_\_\_\_ (H) WORK ORDER NO.: \_\_\_\_\_ (I)

CDOT PROJ. DESC: \_\_\_\_\_ (J)

Release # \_\_\_\_\_ (K) Tel: \_\_\_\_\_ Ship to: \_\_\_\_\_

AMOUNT OF BASIC CONTRACT SERVICES: \_\_\_\_\_ (L)

CONTRACT CEILING INCLUDING MOD: \_\_\_\_\_ (M)

AMOUNT OF CURRENT INVOICE: \_\_\_\_\_ (N)

AMOUNT INVOICED TO DATE INCLUDING CURRENT INVOICE: \_\_\_\_\_ (O)

Invoice Date \_\_\_\_\_ (P) Name of Consultant \_\_\_\_\_ (Q) Official Signature & Title \_\_\_\_\_ (R) Date \_\_\_\_\_

BFY	FUND	DEPT.	ORGAN.	APPROP.	OBJ.	RPTC.	PROJECT	full description of need (needed by ____ / ____ / ____ ) emergency ? <input type="checkbox"/> no <input type="checkbox"/>	quantity	unit meas.	unit cost	est. cost
COMMODITY CODE												
COMMODITY CODE												
COMMODITY CODE												
COMMODITY CODE												
COMMODITY CODE												
<b>TOTAL \$</b>												

Approved by: \_\_\_\_\_ Auditor Comptroller's No.: \_\_\_\_\_

Services Verified by: \_\_\_\_\_ Date Approved for Payment by: \_\_\_\_\_

Rates Verified by: \_\_\_\_\_ Date

COMMISSIONER OF TRANSPORTATION

Copies: White—Comptroller; Green—Commissioner of CDOT; Yellow—CDOT Accounting; Pink—CDOT Contracts; Goldenrod—Vendor

**APPENDIX II**

INVOICE SUMMARY

CONSULTANT'S INVOICE NO:	Original Task Order:	\$109,000.00
CONSULTANT'S JOB NO:	Supplement 1:	\$65,000.00
PROJECT DESCRIPTION:	Total:	\$174,000.00
CONTRACT NO:	Remaining on Contract:	\$0.00
RELEASE NO:		
INVOICE PERIOD: 01/01/2005 - 01/31/2005		

ITEM			CURRENT	PRIOR	CUMULATIVE
1	DIRECT SALARIES		\$ -		
2	PAYROLL MULTIPLIER	150.00%	\$ (617.90)		
3	MAXIMUM FIXED FEE	\$ 74,446.00		\$ (617.90)	
4	PREMIUM OVERTIME				
5	IN-HOUSE DIRECT COSTS				
6	OUTSIDE DIRECT COSTS				
7	SUB CONSULTANTS				
8	TOTAL AMOUNT EARNED TO DATE				
9	LESS PREVIOUSLY INVOICED				
10	<b>PAYMENT DUE THIS INVOICE</b>				

**SUBCONSULTANTS AND/OR VENDORS ASSIGNED TO MASTER AGREEMENT**

NAME	TYPE	CONTRACTED AMOUNT	INVOICED TO DATE	PAID TO DATE
Minority Firm's Name A	MBE			
Non-Minority Firm's Name B	N/A			
Minority Firm's Name C	WBE			
Non-Minority Firm's Name D	N/A			

I certify that the percent of work shown as completed on this invoice is correct, and the purchase, lease, or rental of digital cameras, computers, engineering instruments, cellular phones, (vehicles, fuel and maintenance), and field office supplies, are for the sole purpose of the performance as described, and is in accordance with Exhibit 2 item 3, paragraph d of this agreement.

\_\_\_\_\_  
Jonn Doe, Project Manager

\_\_\_\_\_  
DATE

Required:

CONTACT NAME: \_\_\_\_\_

DIRECT PHONE #: \_\_\_\_\_

CELL PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**APPENDIX III**

INVOICE DETAIL

CONSULTANT'S INVOICE NO:	Task Order Amout:	\$109,000.00
CONSULTANT'S JOB NO:		
PROJECT DESCRIPTION:	Remaining Amount:	\$0.00
CONTRACT NO:		
RELEASE NO:		
INVOICE PERIOD: 01/01/2005 - 01/31/2005		

<u>Employee</u>	<u>Classification</u>	<u>Rate</u>	<u>Hours</u>	<u>Totals</u>
T. Johnson	Principle			
R. Murphy	Project Manager			
B. Armstrong	Senior Project Manager			
A. Brown	Jr. Project Manager			
D. Harris	Senior Technician			
K. Moody	Jr. Technician			
DIRECT LABOR TOTALS:				\$ -
<b>Overhead &amp; Burden:</b>				
			150.00%	\$ -
Maximum Fixed Fee: \$74,446.00 x 5.64% completed to date				\$ 4,198.75
Previous Fee: 0.83%				(\$617.90)
Current Fee:				\$4,816.65
 <b>Outside Direct Costs:</b>				
Company A				
Company B				
Company C				
Personal Car Mileage: 1,653 miles			0.505	
Parking:				
 <b>In-House Direct Costs:</b>				
Company Vehicle:			\$ 45.00	
Copies:				
CADD Hours:				
Premium Overtime:				
 <b>Sub consultants:</b>				
A	Invoice #1			\$ 4,000.00
B	Invoice #2			\$ 2,000.00
C	Invoice #3			\$ 10,000.00
				\$ 3,000.00
				\$ 6,000.00
TOTALS:				\$ 25,000.00

**TOTAL DUE THIS INVOICE:**

**APPENDIX IV**

**CITY OF CHICAGO  
BLANKET RELEASE**

**Reprint**

Furnish the supplies and/or services described below in conformance with conditions set forth herein and in your offer

RELEASE DATE	PURCHASE ORDER	RELEASE NUMBER	SPECIFICATION NUMBER	VENDOR NUMBER	SITE NAME	DELIVERY DATE	PAGE NUMBER
							0

**DELIVER TO:** 84-A02  
 A02  
 COMMISSIONERS OFFICE  
 30 N. LASALLE ST - STE 1100  
 CHICAGO ILLINOIS 60602-2570  
 Chicago, IL

**ORDERED FROM:**

DELIVERY CHARGES to be PREPAID  
 TITLE TO PASS ON DELIVERY

**CONTACT:** ██████████ 2-0317 (Contracts)  
**PO DESCRIPTION:**

**BLANKET RELEASE**

THIS SIGNED RELEASE IS YOUR AUTHORITY TO FURNISH THE SPECIFIED SUPPLIES AND /OR SERVICES IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE BLANKET AGREEMENT NUMBER: ██████████

THIS PURCHASE IS FOR DEPARTMENT: 84 - CHICAGO DEPARTMENT OF TRANSPORTATION

SUBMIT THE ORIGINAL INVOICE TO: A06  
 BUREAU OF BRIDGES AND TRANSIT  
 30 N. LASALLE ST - STE 500  
 Chicago, IL

PO Line	Line	COMMODITY INFORMATION	QUANTITY	UOM	UNIT COST	TOTAL COST
1	2	90694 ROADWAY CONSTRUCTION ENGINEERING SERVICES Professional Engineering Services Full time administrative staff ██████████ Ave. from ██████████ Place	188 625,00	USD	1,00	188 625,00
						<b>SHIPMENT TOTAL: 1:</b>
						<b>RELEASE TOTAL: 1</b>

APPROVAL:

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Payment on this order will be made upon receipt of an original vendor invoice form referencing this order. Submit the original invoice to the department referenced above. Mark all packages and papers with the purchase number. Any deliveries containing overshipments will be reflected unless otherwise authorized in this purchase. This purchase is subject to the City of Chicago General Conditions for Supplies, Work, or Professional Consulting Services; Special Conditions, Disclosure Ownership, Acceptance Page, as applicable, which are attached hereto or incorporated herein by reference.

APPENDIX V



City of Chicago  
Richard M. Daley, Mayor

Department of  
Procurement Services

Barbara A. Lumpkin  
Chief Procurement Officer

City Hall, Room 403  
121 North LaSalle Street  
Chicago, Illinois 60602  
(312) 744-4900  
(312) 744-2949 (TTY)  
<http://www.cityofchicago.org>

January 11, 2007

Dear City Vendor:

Since August 2005 the City of Chicago has required all vendors with construction contracts to report intended subcontractor payments when submitting invoices for payment. In 2007 the City is extending this reporting requirement to all vendors with City contracts.

You are receiving this letter because you have an active contract with the City of Chicago and must begin reporting intended subcontractor payments with each invoice submitted for payment on or after February 1, 2007. Payment amounts must be remitted by the Contractor to the subcontractor no later than fourteen (14) business days after receipt of payment from the City of Chicago provided the subcontractor has satisfactorily completed its portion of the contract work.

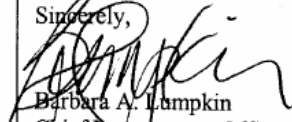
You must sign and date the Subcontractor Payment Certification Form and submit the form with each invoice. A sample Certification Form is attached. You may also download and print the form by accessing the City's website at [http://egov.cityofchicago.org/webportal/COCWebPortal/COC\\_EDITORIAL/subcompliance.pdf](http://egov.cityofchicago.org/webportal/COCWebPortal/COC_EDITORIAL/subcompliance.pdf)

We have attached instructions and completed a sample form to demonstrate how the information is to be completed. If there are no payments to subcontractors for a particular invoice, please enter \$0 in the "Total Amount to be Paid to Subcontractors" field, sign and submit the form with your invoice. Invoices should continue to be sent to the appropriate City department for whom your company provides materials or services.

Vendors who desire more training on this new process are encouraged to attend "Doing Business with the City" workshops, which are held on a monthly basis at City Hall. Please refer to the Department of Procurement Services website at [Cityofchicago.org/procurement](http://Cityofchicago.org/procurement) for exact times and locations.

If you have questions regarding this new process for Contract Compliance, please contact Monica Cardenas, Deputy Procurement Officer for Compliance, at 312-744-2344. Thank you for your assistance with the City's efforts to facilitate prompt payment to subcontractors.

Sincerely,

  
Barbara A. Lumpkin  
Chief Procurement Officer  
CITY OF CHICAGO





## APPENDIX VI

### Help Text: Subcontractor Payment Certification

The following Help Text is intended to assist vendors in the completion of the "Subcontractor Payment Certification-Compliance Copy" form. This Help Text and the "Subcontractor Payment Certification-Compliance Copy" form can also be found on the Department of Procurement Services' website at [http://egov.cityofchicago.org/webportal/COCWebPortal/COC\\_EDITORIAL/subcompliance.pdf](http://egov.cityofchicago.org/webportal/COCWebPortal/COC_EDITORIAL/subcompliance.pdf).

If you have questions about the "Subcontractor Payment Certification-Compliance Copy" form which are not answered by this guide, please call the Compliance Unit of the Department of Procurement Services at (312) 744-2344 between 8:30 a.m. and 4:30 p.m., Monday through Friday, and someone will assist you.

**DISCLAIMER:** These instructions, examples and/or definitions are not intended as advice, legal or otherwise, on the specific answers vendors should provide when filling out this form. They are merely provided in response to frequently asked generic questions.

#### Overview

This form must be submitted by all current City of Chicago vendors monthly. This form takes the place of the quarterly utilization report. Reports should be submitted on or before the fifth of the month directly to the Department of Procurement Services (DPS). The DPS mailing address is listed on top of the form. For the duration of an active contract or agreement with the City of Chicago, monthly forms will be required even if no invoices have been generated. If no invoices have been submitted, list \$0 on the form.

Failure to submit the "Subcontractor Payment Certification-Compliance Copy" form by the monthly deadline will delay payment to the vendor.

Note that invoices should be still be sent to whatever City of Chicago departments contracted with the vendor. "Subcontractor Payment Certification" forms are a summary of all City of Chicago invoices for a contract or agreement and should be sent to DPS. One "Subcontractor Payment Certification" form should be submitted for each active contract or agreement; do not combine multiple contracts or agreements on a single form. Multiple invoices may be listed on a single form as long as they pertain to the same contract or agreement.

#### Line-by-Line Descriptions

##### Prime Contractor Name

This is the name of the vendor, as listed on City of Chicago contracts and agreements, submitting the form.

##### Prime Contractor Vendor/Supplier Number

A unique number is assigned by the City of Chicago to every vendor. If there is any question about a vendor's number, contact the lead City of Chicago department on a current contract or agreement.

##### Contract/Purchase Order/Release Numbers

This number should be listed in the official contract or agreement with the City of Chicago. If there is any question about this number, contact the lead City of Chicago department on a current contract or agreement.



## Help Text: Subcontractor Payment Certification

### Monthly Estimate Invoice Numbers

This may be one or more numbers depending on how many invoices were generated and submitted by a vendor during the month. List the invoice number of every invoice submitted to the City of Chicago, for the month reported on this form, for a *single* contract or agreement regardless of what department received the invoice. A vendor should only submit more than one "Subcontractor Payment Certification" form if it has more than one active contract or agreement with the City of Chicago.

### Amount Due This Estimate

This is the total amount of all invoices submitted for the month on a single contract or agreement.

### Estimated Amounts to be Paid by the Prime to Authorized Subcontractors from this Estimate

In this table, list all the subcontractors utilized by the prime vendor during the month. Type/print the full subcontractor name (minimize abbreviations). In asking for "Authorized Subcontractors," DPS means that they should also appear on the prime vendor's Economic Disclosure Statement (EDS) and, if intended to help meet M/W/DBE obligations, on the DPS-approved compliance plan. If any substitutions or additions are made to either subcontractor list, notify DPS immediately.

In the "M/W/DBE" column, indicate if the subcontractor is acting as an MBE, WBE, or DBE on this contract by writing "MBE," "WBE," or "DBE" next to the subcontractor's name. If they are a non-certified firm or not being counted toward M/W/DBE goals, write "N/A" next to their name. If there is any question about a subcontractor's vendor number, contact the lead City of Chicago department on the current contract or agreement. The payment amount should be the agreed-upon payment due to the subcontractor for work performed during the month. Do not list a subcontractor more than once; add up all intended payments to them for the month.

### Total Amount to be Paid to Subcontractors

This is the sum of all intended subcontractor payments for the month. This should be the amount agreed to by the prime and subcontractors.

### Balance Due Prime Contractor

To get this amount, subtract the "Total Amount to be Paid to Subcontractors" from "Amount Due This Estimate."

### Certificate of the Contractor of his/her Duly Authorized Representative

"Contractor" is the business name of the prime contractor company. "Signed By" is the name of the senior manager signing this form. "Title" is that senior manager's job title. "Date" is the date the form was signed. No unsigned forms will be accepted.

**APPENDIX VII**



**Subcontractor Payment Certification - Compliance Copy**

Return to: Department of Procurement Services  
 Attn: Contract Compliance Unit - Room 403 City Hall  
 121 N. LaSalle Street  
 Chicago, Illinois 60602

Prime Contractor Name

Prime Contractor Vendor/Supplier Number

Contract/Purchase Order/Release Number

Monthly Estimate Invoice Numbers

Amount Due This Estimate

**Estimated Amounts to be Paid by the Prime to Authorized Subcontractors from this Estimate**

	Subcontractor Name	M/W/DBE	Subcontractor Vendor/Supplier Number	Payment Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**Total Amount to be Paid to Subcontractors**   
*(If no subcontractors will be paid this invoice, please enter \$0)*

**Balance Due Prime Contractor**   
*(Amount Due this Estimate less Total Amount to be Paid to Subcontractors)*

**Certificate of the Contractor or his Duly Authorized Representative**

Under penalty of perjury, I certify that (1) I am authorized to execute this Subcontractor Payment Certification (herein after "Certification Form"); (2) I have conducted reasonable due diligence in collecting the information to be submitted with this Certification Form; (3) based on my knowledge, neither the Form or any document attached thereto, contains any untrue information nor do any of the foregoing omit any material fact necessary to make the information contained herein true and complete; (4) I understand that my company is obligated to pay any and all subcontractors identified above within 14 calendar days of receipt of payment from the City of Chicago; (5) I further understand that the Compliance Unit of the Department of Procurement Services (DPS) will contact any such subcontractors to ensure their receipt of payments due and owing from my company; (6) I understand that if the City determines that any information provided in the Certification Form, or any other document submitted to the City, is intentionally false or misleading, the City may pursue any and all remedies at law or in equity, including without limitation termination of any and all contracts with my company, debarment of my company from doing business with the City of Chicago, as well as make a referral to the appropriate law enforcement agency or agencies.

**Contractor** \_\_\_\_\_

**Signed By** \_\_\_\_\_

**Title** \_\_\_\_\_

**Date** \_\_\_\_\_

For Internal Purposes  
 Contract Type:  
 Specification Number:



**APPENDIX IX**

**DEPARTMENT DIVISION TIME SHEET**

CITY OF CHICAGO DAILY TIME REPORT FOR EMPLOYEES

PRIME CONSULTANT: \_\_\_\_\_

SUB CONSULTANT: \_\_\_\_\_

CDOT  
(Department)

ADMINISTRATION  
(Division)

RECORDS & ESTIMATES  
(Section or Unit)

\_\_\_\_\_ Period Ending

INSTRUCTIONS FOR PREPARING REPORT: This record is to be signed by employee and examined, approved and certified to by the supervisor at the close of each day. Only when an employee is AUTHORIZED to do overtime work shall an overtime entry be made on this form. DO NOT use where a Time Clock is provided for employees.

THE FOLLOWING IS A CORRECT RECORD OF THE TIME WORKED BY ME TODAY FOR THIS DEPARTMENT

DATE	DAY OF THE WEEK	EMPLOYEE NAME (TYPE OR PRINT)		SIGNATURE OF EMPLOYEE AT TIME OF ARRIVAL	FIRST AND SECOND HALF OF DAY				AUTHORIZED OVERTIME				SIGNATURE OF EMPLOYEE AT TIME OF DEPARTURE	CDOT PROJECT NO.
		LAST	FIRST		TIME OF ARRIVAL	TIME OF DEPART	ACTION CODE	REGULAR HOURS	FROM	TO	ACTION CODE	O.T. HOURS		
	MONDAY													
	TUESDAY													
	WEDNESDAY													
	THURSDAY													
	FRIDAY													
	SATURDAY													
	SUNDAY													

I HAVE EXAMINED AND APPROVED THIS RECORD AND CERTIFY THAT THE SERVICE WAS RENDERED BY EACH INDIVIDUAL NAMED UNDER MY SUPERVISOR  _____ (SIGNATURE OF APPROVING AUTHORITY)	ENTERED ON TIME ROLL RECORD  BY: _____  TITLE: _____	CODE PAYROLL ACTION  _____	CODE PAYROLL ACTION  _____
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