



**ATTACHMENT A9-2
INVOICE REVIEW CHECKLIST PHASE II**

IDOT Office of Intermodal
Project Implementation

RAILROAD: _____	Federal Project Number: _____
CREATE Project Number: _____	State Rail Agreement Job Number: _____
SRA Original Start Date: _____	PS&E Assigned to the Project: _____
NTP Date: _____	Invoice #: _____
SRA Original End Date: _____	_____
SRA Revised End Date: _____	Rev # _____

Item	Description	Yes	No	Comments
1	Is CREATE cover sheet included and fully filled out with signature?			
2	Verify that all the information included in the invoice pertains to the SRA			
3	Are the contractors and subcontractors invoiced the same as identified in the request for NTP or concurrence to award design contract?			
4	Verify that the current invoice includes a statement that this invoice does not include previously billed costs and that all subcontractors and or sub-consultants have been previously paid.			
5	Verify that invoiced items are on the project eligible charges list.			
6	Verify a description of work accomplished for the date range invoiced is included in the invoice.			
7	Are all services invoiced within the time period?			
8	Verify that all information is legible.			
9	Is invoice summary page included and consistent with CREATE cover page back-up detail?			
10	Validate that sub-total, total amounts and back-up math is accurate.			

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Item	Description	Yes	No	Comments
11	Verify that appropriate back-up documentation is provided and expenditure descriptions are clear.			
12	Verify that all third party invoices are included in the invoice back-up.			
13	Verify labor, equipment, material, overhead (OH) and transaction fees match rates provided against applicable contract agreements.			
14	Do all labor hours include the names, rates and dates worked?			
15	Verify travel charges include per diem purpose, origin, destination and travel miles.			
26	Are charges equal or less than the State and Federal maximum charges allowed for labor and per diem expenses?			

General Comments:

All boxes should be checked. If an item is 'Not Applicable' (NA), the reviewer shall mark 'NA' in the 'YES' column and attach additional explanation as needed.

Checklist must be signed and dated by IDOT OIPI-assigned personnel reviewing the invoice and submitted with the recommendation for invoice approval.

Reviewed By:

Name: (Printed) _____ Signature: _____

Title: _____ Date Signed: _____