massDOT Commonwealth of Massachusetts Office of the Comptroller Payment Commodity Form

MMARS schedule payment date is Deadline for \$228.64 discount is 5/4/2017. Please process as soon as

77/	9878 Date:	Phone Ext.:		ager	IT Finance Manager	Title: IT Fir	=		Signed:	S	William Yee	1	Print Name:
	Cot 1	Ext.:			(•		0				
<i>u</i>	Od/ Date:	Phone			MA	Title: L	 		Signed:	add s	7.	me:	Print Name:
	(Initial)			(Initial)		_			•	· -	·		,
	Date:	Verified By:	Date:		Entered By:		sements of public f	governing disbur	I hereby certify under the penalties of perjury that all laws of the Commonwealth governing disbursements of public funds and the regulations thereof have been complied with and observed.	ory that all laws of the	he penalties of per have been compli	rtify under toons thereof	I hereby ce the regulat
			NLY	FOR FISCAL USE ONLY	FOR FISC		ETTS	ASSACHUS	TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS	HE COMMON	ROLLER OF T	COMPT	TO THE
						Function		Dept Object		\$78,020.48	ount	Sub Total Line Amount	Sub Total
			Check Descr	Partial	Pa	Ref Type	17903004	Appropriation	EPP	Program Period	DOT		Dept
			Phase			Activity	ม 33	Object	087C	Sub Fund			Bank Accl
ion for the	RMV008 (Requirements definition for the	RMV008 (Program		men	Major Program	IR03	Unit		Fund	2017		Budget FY
						nners	48 Fujitsu Scanners	Description	8	Ref. Line	AP01		Event Type
1										ation	Accounting Information	- Accou	Line #1-
											- St. 18		
			PERCENT 4		DAYS 4		PERCENT 2		DAYS 2				
			PERCENT 3	1	DAYS 3	8	PERCENT 1 0.2500	10	DAYS 1				
		b ю.	es soon as possible.	process as	17. Please	nt is 4/2/20	Deadline for \$228.64 discount is 4/2/2017. Please proces	Deadline for	Discount Terms		\$91,455.52		Contract Amount
		3/23/2017	Inv. Date			0090042	NTF00X02016J0090042	Ref ID	3/7/2017	Service To		easure	Unit of Measure
		1	Inv. Line	1	Ref cl		TOO	Ref Dept	3/7/2017	Service From			Quantity
		INV19901	Vendor Inv. #	1	RefvI		СТ	Ref Code		Unit Price	Service		Line Type
							hardware	Description		List Price	821300000000		Commodity Code
										nation	Line #1- Commodity Information	- Comm	Line #1
							Comment					Note	Report Note
		/ment	Single Payment				AD001	že	Address Code		dota8z		Requester ID
		Code	Handling Code			3131	VC6000183131	omer No.	Vendor/Customer No			y Date	SCH Pay Date
State TN		FRANKLIN	City FRA	650	STE	THERS PH	6840 CAROTHERS PKWY	ess.	Vendor Address		9		Period
					A, LLC	TRUST US	MORPHOTRUST USA,	9	Vendor Name		2017		Fiscal Year
					,	ļ	\$91,455.52	otal	Document Total		2017		Budget FY
	THE REAL PROPERTY.							10 NEW 100		S S S S S S S S S S S S S S S S S S S	nation	Header Information	Heade
		INVOICE	SEE ALIACMED INVOICE		(Please Sign in ink)	Entry (P)	3	2N00010	INTF17J0090042N00010	IN.	0287	DOT	PRC
	PACE STATE	et forth be	service rendered as set forth below:	serv		Action	1	ntifler	Document Identifier	_	Unit	Dept	Code
	NOIT	TIFICA	VENDORS CERTIFICATION	VEN					Document I.D.	Docu		NAME OF TAXABLE PARTY.	
		ø	4	-					is.	48 Fujitsu Scanners		Document Description	Docu
1831]	[1804831]						DUCTION	ENSE PRO	Document Name MORPHO TRUST DRIVERS LICENSE PRODUCTION	PHO TRUST	nt Name MOR	Documen	П

massport Commonwealth of Massachusetts Office of the Comptroller Payment Commodity Form

MMARS schedule payment date is 5/4/2017.

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Entry (Pease Sign in Ink)	Entry	INTF17J0090042N00010	0287	PRC DOT 0287	PRC
service rendered as set forth below	Action	Document Identifier	Unit	Dept Unit	Code
VENDORS CERTIFICATION Certify that the goods were shipped or the		Document I.D.			
		Document Description 48 Fujitsu Scanners	ription 48	ent Desc	Docum
[1804831]	1720	Document Name MORPHO TRUST DRIVERS LICENSE PRODUCTION	Name M)ocument	

Line #2- Acco	Line #2- Accounting Information	ion							
Event Type	AP01	Ref. Line	9	Description	48 Fujitsu Scanners	nners			
Budget FY	2017	Fund		Unit	IR03	Major Program	9	Program	C000000
Bank Acct		Sub Fund	0000	Object	J33	Activity	009N	Phase	000
Dept	DOT	Program Period EPP	EPP	Appropriation	60440001	Ref Type	Partial	Check Descr	
Sub Total Line Amount	ount	\$13,435.04		Dept Object		Function			

I hereby certify under the penalties of perjury that all laws of the Commonwealth governing disbursements of public funds and the regulations thereof have been complied with and observed. Print Name: TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS Print Name: Signed: Signed: Prepared by Title: Tile: Entered By: FOR FISCAL USE ONLY (Initial) Phone Ext.: Phone Ext.: Verified By: (Initial) 9878 Date: Date:

Authorized Signatory

Cadorette, John (DOT)

From:

Chanthaboun, Sye (DOT) < Sye.Chanthaboun@MassMail.State.MA.US>

Sent:

Thursday, March 23, 2017 10:40 AM

To: Cc:

Cadorette, John (DOT); Pires, Antonia (DOT)

Subject:

Evans, Steve (DOT); Rong, Debbie H (DOT)

Attachments:

FW: INV19901 INV19901.pdf

John,

This invoice is associated with Request Number 11521.

Thanks,

Sye

Sye Chanthaboun 857-368-7722

From: Evans, Steve (DOT)

Sent: Thursday, March 23, 2017 10:25 AM

To: Rong, Debbie H (DOT) < debbie.h.rong@dot.state.ma.us>

Cc: Chanthaboun, Sye (DOT) < Sye.Chanthaboun@MassMail.State.MA.US>

Subject: FW: INV19901

Debbie- we got this but I believe Sye forwarded it to John Caderet

From: Ros, Sarah [mailto:SRos@MorphoTrust.com]

Sent: Tuesday, March 7, 2017 3:28 PM

To: Gurney, Todd (DOT); Evans, Steve (DOT)

Cc: Zaphiris, Sarah (DOT); Chanthaboun, Sye (DOT); Allard, Scott; Grochmal, Diane

Subject: INV19901

Hi,

Please see attached INV19901 for the Deployment of 48 Fujitsu Scanners. Please let me know if you have any questions.

Thank You,

Sarah Nguyen Ros

Accounting Supervisor

MorphoTrust USA

Phone: 978-215-2443 Mobile: 978-490-4778 Fax: 978-215-2500 296 Concord Road

Suite 300

Billerica, MA 01821 USA sros@MorphoTrust.com www.MorphoTrust.com



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MorphoTrust USA

296 CONCORD RD BILLERICA MA 01821

INV19901 Invoice 3/7/2017 Date Page

Tel 978-215-2400 Fax 978-215-2500 Federal ID#: 04-3320515 CL1-8 1790-3004

Bill To:

MassDOT - IT Attn: Antonia Pires 10 Park Plaza, Room 5231 Boston MA 02116 **United States**

Ship To:

MASSACHUSETTS LICENSE PROGRAM Attn: Antonia Pires 10 Park Plaza, Room 5231 Boston MA 02116 **United States**

		Gustomer ID	Shippi	ing Method	NetiDue	Date	Payment	Terms	Re	q Ship Date	Master No.
	87 (7090042				4/6/2017	,	Net 30			/2017	479,344
										Unit Price	Ext. Price
	Shipped		Number	Description Deployment C	on	8 Fujitsu Sca	anners	\$ 0.000 4 8 04			Ext. Price
ox.					20	S.					

Subtotal	\$ 91,455.52
Tax	\$ 0.00
Freight	\$ 0.00
Less	\$ 0.00
Total	\$ 91,455.52

PLEASE REMIT TO: