MMARS schedule payment date is 8/11/2018.

Requester ID SCH Pay Date Fiscal Year Budget FY Period Header Information PRC Code Document Description installation for 34 Honeywell Genesis 7580G Barcode Scanners Document Name DRIVER LICENSING WORKSTATIONS DLD/ID RMV DOT Dept 2018 2018 겁 dotadi 0281 Unit Document I.D. INTF18M0103179Y00002 Document Identifier Document Total Address Code Vendor/Customer No. Vendor Address Vendor Name VC6000183131 6840 CAROTHERS PKWY STE 650 \$18,200.00 AD001 MORPHOTRUST USA, LLC Entry (Please Sign in Ink) Action VENDORS CERTIFICATION certify that the goods were shipped or the service rendered as set forth below SEE ATTACHED INVOICE Single Payment Handling Code City FRANKLIN [2049323] State Ź

Line #1- Commodity Information	nodity Inform	ation				STATE OF THE PARTY OF	The State		
Commodity Code 801117130000		List Price	\$1.00	Description	Description HARDWARE				
Line Type	Item	Unit Price	\$1.00	Ref Code	PC	Ref vi		Vendor Inv. # INV21893	INV21893
Quantity	18200	Service From 6/27/2018	6/27/2018	Ref Dept	DOT	Ref cl	_	Inv. Line	
Unit of Measure	EA	Service To	6/30/2018	Ref ID	INTF00002018M0103179			Inv. Date	6/27/2018
Contract Amount \$18,200.00	\$18,200.00		Discount Terms	San San San					
			DAYS 1	- The Indian	PERCENT 1	DAYS 3		PERCENT 3	
			DAYS 2		PERCENT 2	DAYS 4		PERCENT 4	
			DAYS 2			DAYS 4		PERCENT	١

Report Note

Comment

Line #1- Accounting Information	ng Informa	tion							
Event Type AP01	)1	Ref. Line	4	Description	installation fo	installation for 34 Honeywell Genesis 7580G Barcode Scanners	nesis 7580G B	arcode Scanners	
Budget FY 2018	:	Fund		Unit	IR01	Major Program		Program	IT18220042 (RMV service center
Bank Acct		Sub Fund	403C	Object	U07	Activity	N600	Phase	P11
Dept DOT	1	Program Period	€PP	Appropriation	67201307	Ref Type	Partial	Check Descr	
Sub Total Line Amount		\$18,200.00		Dept Object		Function	15519		

Print Name: William You Signed: Property by	Print Name: John Caderth Signed: Title:	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.	TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS
IT Frumme up	m 19-	Entered By: Date: (Initial)	FOR FISCAL USE ONLY
Phone Ext.:	Phone Ext.	Verified By	
ate	7960 Date:	(Initial)	
1.6.19	7121/		

## MorphoTrust USA

296 CONCORD RD BILLERICA MA 01821

Tel 978-215-2400 Fax 978-215-2500 Federal ID#: 04-3320515

Invoice	INV21893
Date	6/27/2018
Page	1

JUN 27 2018 PM 5:51

Bill To:

MASSACHUSETTS LICENSE PROGRAM MassDOT - IT Attn: Antonia Pires 10 Park Plaza, Room 8350 Boston MA 02116 United States Ship To:

COMMONWEALTH OF MASSACHUSETTS MassDOT - IT Attn: Antonia Pires 10 Park Plaza, Room 8350 Boston MA 02116 United States

Purchase Order N	o. Custome	er ID	Shipp	ing Method	Net Due Date	Paymen	t Terms	Req Ship Date	Master No.
SEE BELOW	MAS010	100	BEST	WAY	8/11/2018	0.25% 1	0 Net 45	6/27/2018	504,439
Ordered Shipped		Item Nun		Descriptio			Discount	Unit Price	Ext. Price
		DELIVERA	ABLE	Installation of 3- Barcode Sc purchase of P.O. # PCD	4 Honeywell Genesis 7: anners at 17 Offices; in five Barcode Scanners OT028718103179-3	cludes	\$ 0.000		
								3	
							Subtotel		\$ 18 200 00

Subtotal	\$ 18,200.00
Tax	\$ 0.00
Freight	\$ 0.00
Less	\$ 0.00
Total	\$ 18,200.00

PLEASE REMIT TO:

MorphoTrust USA 14438 Collections Center Drive Chicago IL 60693

## Cadorette, John (DOT)

From:

Ocana, Hector < Hector. Ocana@us.idemia.com >

Sent:

Wednesday, June 27, 2018 5:09 PM

To:

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

Cc:

Priestly, Tracey; Grochmal, Diane

Subject:

Massachusetts invoice INV21893

**Attachments:** 

INV21893.pdf

Attached you will find your invoice. If you have any questions, please feel free to contact me.

Best regards, Hector Ocana

Hector Ocana Accountant | Finance

P. (978) 215 2597 M. (000) 000 0000

E. Hector.Ocana@us.IDEMIA.com

298 Concord Road Sude 300

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