



[2225628]

Document Name: **DLD/DID RMV #90042 HARDWARE/SOFTWARE**

Document Description: **Software Remap**

Code: **DOT** Unit: **0287** Document Identifier: **INTF19M0103179Y00012** Action: **Entry**

Header Information: **Document I.D.**

Budget FY: **2019** Document Total: **\$15,000.00**

Fiscal Year: **2019** Vendor Name: **MORPHOTRUST USA, LLC**

Period: **13** Vendor Address: **6840 CAROTHERS PKWY STE 650** City: **FRANKLIN** State: **TN**

SCH Pay Date: Vendor/Customer No.: **VC6000183131** Handling Code: **Single Payment**

Requester ID: **dotabz** Address Code: **AD001**

Report Note: **Comment**

**Line #1 - Commodity Information**

Commodity Code	List Price	Description	Hardware	Ref VI	Vendor Inv. #
80117130000	\$1.00	PC		1	INV24439
Item	Unit Price	Ref Dept	DOT	Ref cl	1
15000	6/30/2019	Ref ID	INTF00002018M0103179	Inv. Date	7/24/2019
Unit of Measure	Service To	Discount Terms			
EA	6/30/2019	DAYS 1	PERCENT 1	DAYS 3	PERCENT 3
Contract Amount	\$15,000.00	DAYS 2	PERCENT 2	DAYS 4	PERCENT 4

**Line #1 - Accounting Information**

Event Type	Ref. Line	Description	Software Remap	Major Program	Program
AP01	10	Unit	IR01	DOTR	RMV008 (Requirements definition for the
Budget FY	2019	Object	U03	Activity	Phase
Bank Acct	DOT	Appropriation	17903005	Ref Type	Check Descr
Sub Total Line Amount	\$15,000.00	Dept Object	Function	Final	15519

**TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS**

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: William Yee Signed: [Signature] Title: IT Finance Manager

Print Name: William Yee Signed: [Signature] Title: IT Finance Manager

Print Name: William Yee Signed: [Signature] Title: IT Finance Manager

**FOR FISCAL USE ONLY**

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_ Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

(Initial) (Initial)

**MorphoTrust USA**

296 CONCORD RD  
 BILLERICA MA 01821

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

Invoice	INV24439
Date	7/24/2019
Page	1

JUL 24 2019 PM 4:21

**Bill To:**

COMMONWEALTH OF MASSACHUSETTS  
 Mass DOT - IT  
 10 Park Plaza, Room 8350  
 BOSTON MA 02116  
 United States

**Ship To:**

COMMONWEALTH OF MASSACHUSETTS  
 Mass DOT - IT  
 10 Park Plaza, Room 8350  
 BOSTON MA 02116  
 United States

Purchase Order No.		Customer ID	Shipping Method	Net Due Date	Payment Terms	Req Ship Date	Master No.
SEE BELOW		BD-3060	BEST_WAY	8/23/2019	NET 30	7/24/2019	709,952
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price
1.00	1.00	\$ 0.00	DELIVERABLE	MTE Version 4.5.1.13 with MA Configuration version 1.0.0.249 Contract # 90042 Purchase Order # PCDO028719103179-10 Completed the SW Development to Remap Documents 1083 Ln 10 Rec'd 8/30/19 g	\$ 0.00000	\$ 15,000.00000	\$ 15,000.00

<b>Subtotal</b>	\$ 15,000.00
<b>Tax</b>	\$ 0.00
<b>Freight</b>	\$ 0.00
<b>Less</b>	\$ 0.00
<b>Total</b>	\$ 15,000.00

**PLEASE REMIT TO:**

MorphoTrust USA 14438 Collections Center Drive Chicago IL 60693

Cadorette, John (DOT)

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**From:** Ocana, Hector <Hector.Ocana@us.idemia.com>  
**Sent:** Wednesday, July 24, 2019 3:43 PM  
**To:** Cadorette, John (DOT); Kunen, David  
**Cc:** Priestly, Tracey; Grochmal, Diane  
**Subject:** Commonwealth of Massachusetts Milestone invoice INV24439  
**Attachments:** INV24439.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

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Billerica, MA 01821



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