## **G-Invoicing Financial Addendum (Non-DOI Customers)**

Prepare and submit a G-Invoicing Order to Acquisition Services Directorate (AQD)

The table below outlines the required order data to ensure proper transfer and obligation of funds when transacting buy/sell activity. The standard processing time for approved and compliant Requesting Agency orders is **10 business days**. Missing information will result in rejection of funding order.

| Required Item                              | Instruction  |
|--|--|
| Order Number                               | Order Number: Enter unique funding document obligation number                        |
| Order Number                               | Order Modification Number: Enter modification (amendment) number                     |
| General Terms and Conditions (GT&C) Number | Confirm the accuracy of the GT&C number created in the G-Invoicing Treasury Platform |

|                                | PARTNER INFORMATION  |   |
|--------------------------------|--|---|
| Assisted Acquisition Indicator | Select "Yes"   |   |
| Period of Performance          | Enter Start Date   | Enter End Date  |
|                                | Requesting Agency (Buyer)  | Servicing Agency (Seller)                             |
| Agency Location Code (ALC)     | Enter eight-digit Pay Office ALC                                     | Enter DOI ALC 14010001                                |
| Agency Name                    | Enter Agency Name  | Select "Dept of the Interior-Office of the Secretary" |
| Group Name                     | Enter Group Name   | Select "Acquisition Services Directorate"             |
| Funding Office Code            | Use dropdown filter to select "buyer code"                           |   |
| Funding Agency Code            | Use dropdown filter to select "buyer code" FPDSNG Offices; ezSearch; |   |

|                       | Required Item                      | Instruction             |
|-----------------------|------------------------------------|-------------------------|
| AUTHORITY INFORMATION | Statutory Authority Fund Type Code | Select "Franchise Fund" |
| DELIVERY INFORMATION  | FOB Point                          | Select "Source"         |
| ORDER BILLING         | Billing Frequency                  | Select "Monthly"        |

|                                       | LINE ITEM (Repeat for each line item)                                |
|---------------------------------------|--|
| Line Number                           | 1, 2, 3, etc. (Fee Cost needs to be separated on its own line)       |
| Order line status                     | Enter Active   |
| Item Code                             | PSCs; If unknown, contact AQD CO                                     |
| Item Description                      | If unknown, contact AQD CO and include contract number if applicable |
| Line Costs Unit of Measure (UOM)      | Enter UoM - For example, DO (Dollars), EA (Each), etc.               |
| Unit of Measure Description           | Dollars, U.S.  |
| Total Line Costs                      | Enter total amount for line  |
| Order Line advance amount             | Enter amount that will be advance                                    |
| Line Cost Funding Change for this Mod | If modification, enter +/- funding amount change                     |
| Capitalized Asset Indicator           | Good = T or F; Service = F (if unknown, contact AQD CO)              |
| Type of Service Requirements          | Enter Severable or Non-severable (if unknown, contact AQD CO)        |

| Required Item            | Instruction                                     |
|--------------------------|---|
|                          | SCHEDULE SUMMARY                                |
| Schedule Number          | 1, 2, 3, etc.                                   |
| Advance Pay Indicator    | For Advance: Contract Line = Yes, Fee Line = No |
| Cancel Status (schedule) | Enter "Active"                                  |
| Schedule Unit Cost/Price | Enter \$1.00                                    |
| Order Schedule Quantity  | Enter the total amount of the line schedule     |

|  | SCHEDULE FUNDING INFORMATION  |
|--|---|
| Agency Treasury Account Symbol (TAS)   | Enter full component Treasury Account Symbol  |
| Agency Business Event Type Code (BETC)   | Enter DISGF (General Fund) or DISNGF (Non-General Funds)  |
| Description of Products<br>and/or Services<br>including Bona Fide<br>Need for this order | <ul> <li>Provide clear, concise, and detailed description of purpose of funds/requirements</li> <li>Include AQD contracting POC name</li> <li>Include contract/FA application number</li> </ul> |

Any questions regarding this addendum or your G-Invoicing Order, please email <a href="mailto:AQDfundingdocuments@ibc.doi.gov">AQDfundingdocuments@ibc.doi.gov</a>