

THE OVERALL CLASSIFICATION OF THIS BRIEFING IS:

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BUSINESS MANAGEMENT & ACQUISITION

(U) Invoicing Information for Contractors under CARES Act



(U) What Costs are Allowable Under CARES?

(U) The CARES Act addresses labor costs (no materials). Other costs may be addressed by submitting a Request for Equitable Adjustment (REA) to the Contracting Officer.

(U) Hours charged must have occurred on or after 31 January 2020, when the public health emergency was declared. Any claims for affected work prior to that date must be addressed through an REA. NSA is not anticipating significant costs to have been incurred prior to the implementation of COVID Code Yellow on 18 March 2020. Any such costs claimed on an invoice prior to 18 March will be scrutinized and may require additional supporting documentation or submission of an REA.

(U) The individual(s) must have been performing on contract on or before 27 March 2020. Any exceptions to that start date MUST be approved in writing by the Contracting Officer and must be reported to the Primary COR.

(U) Hours billed in cumulative shall not exceed an average of 40 hours per week per obligated FTE including sick leave or other leave. In cases where the FTE support level is less than 40 hours per week, the hours billed must not exceed the stated contractual hours per week. Hours charged must be within the contract (DO and TTO when applicable) ceiling.

(U) The contractor's ability to work must have been restricted due to one of the following reasons:

- (U) As a direct result of the Agency's operating status due to the COVID-19 pandemic; or
- (U) Due to the company's response to the COVID-19 pandemic to protect the health and safety of the workforce; or
- (U) Due to quarantine or illness directly attributable to the COVID-19 pandemic

(U) Hours not worked due to personal choice, non-COVID-19-related illness, or other reasons not covered above, are not covered under this Act and may not be billed.

(U) The hourly rate(s) charged must comply with the established guidelines. The rate charged must be the minimum applicable contract billing rate for the location where the work would have been performed.

(U) The maximum reimbursement authorized shall be reduced by the amount of credits a contractor is allowed under the CARES Act or Public Law 116-127.

(U) As more questions arise and more information becomes available, a Frequently Asked Questions for Contractors document regarding CARES Act Implementation will be published and periodically updated via the ARC.



(U) Invoicing Information for CARES Act Invoices

- (U) Invoices that include CARES Act paid leave hours shall be separate from all other invoices.
- (U) When submitting the invoice to MPO, the vendor shall submit one SF1034/1035 for two invoices covering the same period of performance. The SF1034/1035 will reference the regular invoice number (i.e. Invoice 543) and then a CARES Act associated invoice (i.e. Invoice 543-CARES). This will ensure that the Agency is able to pull and track all invoices under the CARES Act.
- (U) The invoice number in the backup documentation does not have to reflect the “-CARES” designator at the end of the invoice number for the CARES Act invoice. This is a unique exception. All other invoices will be still be rejected if the invoice number in the backup documentation does not match the invoice number submitted to MPO.
- (U) In addition to the standard documentation that is submitted with an invoice, two additional documents must be included:
 1. (U) A completed and signed CARES Act Invoice Contractor Certification (PDF)
 2. (U) A completed Excel template to provide specific information to aid in Government invoice review and internal and external reporting (Excel). This Excel document will include fields for:
 3. (U) Name of employee, Location, On-Site or Off-Site, LCAT, Hourly Rate, Hours Worked and Duration, Hours under CARES and Duration, Total Hours billed
- (U) Templates for both additional documentation requirements will be provided via the ARC and the MPO site.
- (U) Failure to attach any required documentation will result in an invoice rejection

(U) Invoicing Information for Non-CARES Act Invoices

- (U) The invoice process for all regular invoices (not invoices submitted under the CARES Act) has not changed.
- (U) Accounts Payable and the approving BCMO personnel will be pulling, reviewing, and approving invoices on a weekly basis. Expect delays in invoice approvals.
- (U) Contractors may submit invoices at any time of the month. Additional Accounts Payable personnel may be called in to address any surge that happens with CARES invoice submission. BCMO personnel will in turn be reviewing and approving invoices in the few business days after each of those surges. Continue to adhere to invoicing requirements. More accurate invoices means fewer rejections – less rework for all, and more timely payment from the Government.
- (U) Amounts billed must adhere to what is on the contract/TTO, as always.
- (U) Invoices for materials must still have a receipt in FACTS. Due to reduced Government staffing, invoices for goods may have additional delays.
- (U) Invoices for contracts that include Contractor Acquired Property (CAP) must still have an approved CAP report and include the approved JIRA Ticket #. Due to reduced Government staffing, invoices for contracts with unapproved CAP reports may also have additional delays.



(U) Electronic Invoicing

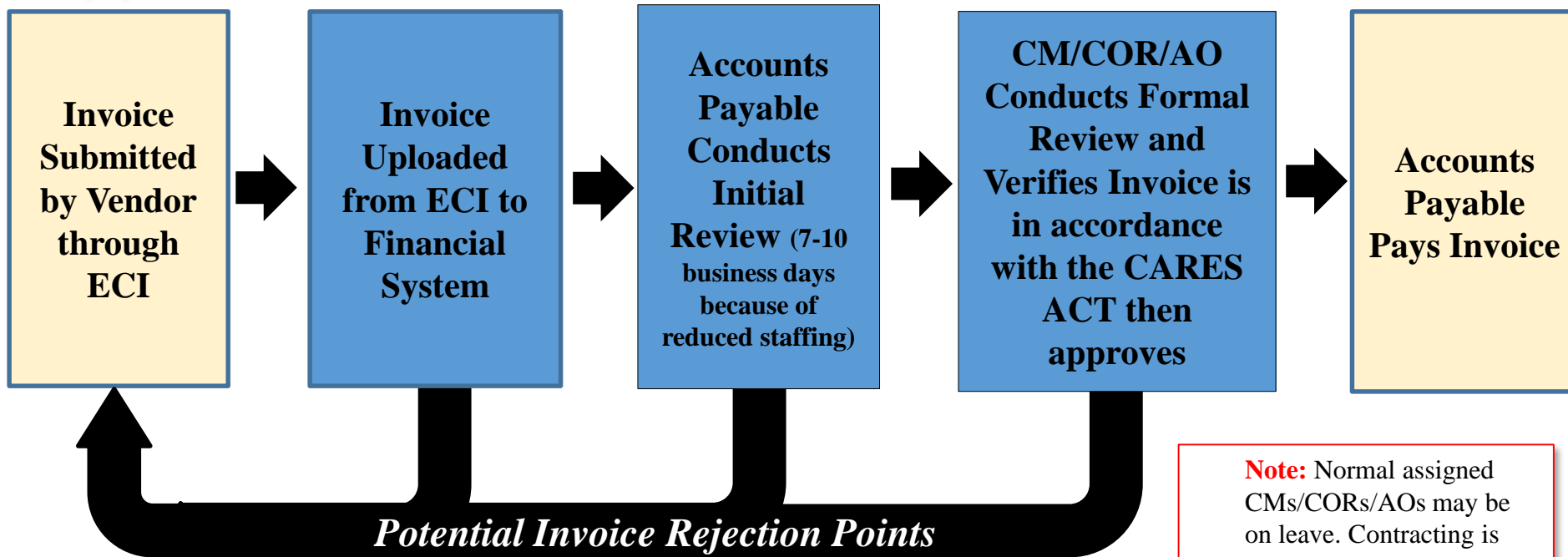
(U) Electronic invoices are received through the Maryland Procurement Office (MPO) website. Vendors are required to purchase a PKI certificate. The cost of a PKI is \$100 per year. The vendor will need to work with Electronic Commerce to obtain an account and password to access the MPO website.

(U) Issues with MPO should be directed to the help desk. Phone (410) 854-5445 or email to dialogue@ec.ncsc.mil



(U) Invoice Approval Process

(U)



Note: Normal assigned CMs/CORs/AOs may be on leave. Contracting is working to assign alternate approvers but invoice approval. This process will be delayed.

(U) Prompt Payment deadline of 30 days may not be met due to reduced staffing because of COVID-19. Accounts Payable and CMs/CORs/AOs are working invoices based on a priority list.

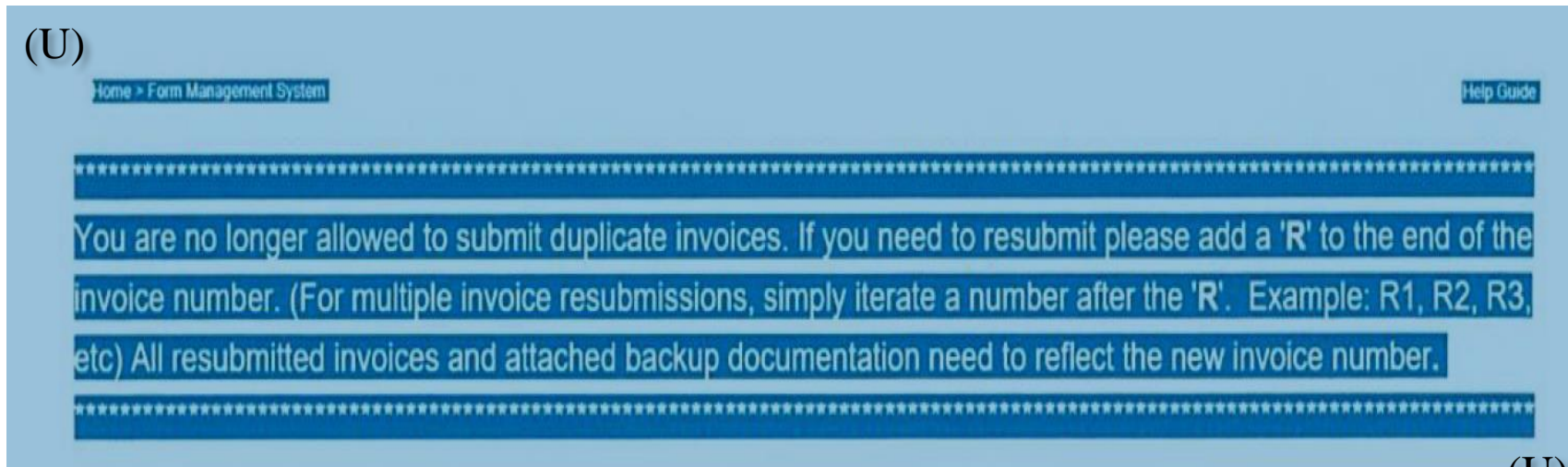


(U) Getting Started

Accessing the E-Commerce Interface

- (U) Access the MPO Website / E-Commerce Interface (ECI) at: <https://mpo.ec.ncsc.mil>
- (U) You will need a PKI Certificate to access ECI
- (U) Instructions for obtaining a PKI Certificate are provided in the Accounts Payable invoicing checklist SOP

(U)



(U)



(U) Submitting an Invoice

- (U) Invoices are submitted via Form 810C Form.

Home > Form Management > 810C Form

Destination

Destination is MPO, DCAA, or ONR. This is based on your contract.

Note: billing for hours worked that do not fall under CARES Act should be submitted on an invoice with no addition notations. IE: regular invoice number Invoice 543 and then a CARES Act associated invoice 543-CARES).

Invoice Information		Service Performed/Good Delivered	
* Invoice Number 543-CARES	* DUNS Number 001111101	* Invoice Start Date 3/27/2020	* Invoice End Date 4/15/2020
<input checked="" type="checkbox"/> No Property Purchased		Discount Percent <input type="text"/>	Days Due <input type="text"/>

Contract Information		Contact Information	
* Contract Number H98230-XX-X-XXXX	Contract Mod <input type="text"/>	* Company Name ABC LLC	
* Job Delivery Order (JDO) 0000 <small>Enter 0000 if not specified in your contract</small>		* Contact Name Jane Doe	* Email janedoe@aol.com
Reference Type <input type="text" value="v"/>	Reference Description <input type="text"/>	* Phone Number 145-759-7555	Extension <input type="text"/>



(U) How to submit Invoice through E-Commerce

- (U) Click the “Add line Item” button to bring up the table to input CLIN/SLIN/ACRN.
- (U) Proper entry of all data is critical
- (U) The invoice will be automatically rejected if common fields between ECI and the Agency’s financial, business and contracting databases do not match (Contract #, SLIN, CLIN, ACRN lines, etc.)

Line Items (U)

Records per page: 10 Search:

CLIN	SLIN	ACRN	DESCRIPTION	QUANTITY	UNIT PRICE	UNITS	ACCUM TOTAL	FUNCTIONS
0001	00	AA	CARES - labor	1.00000	\$170,000.00000	FJ	\$170,000.00	<input type="button" value="Edit"/> <input type="button" value="Delete"/>
Total:							\$170,000.00 (\$170,000.00 total)	

1

Total of 1 records (showing 1 to 1)

Attachments

File Name
There are no submissions.
<input type="button" value="Add"/> <input type="button" value="Remove"/>

▪ Include as Attachments:
CARES Excel with hours;
CARES Act Certification
memo; SF1034/1035; system
support



(U) Attachments: Excel CARES with hours

CARES Act Invoicing Contractor Listing

Date Submitted									
Invoice Number									
Name of Employee	Location: NSAW NSAG NSAT NSAH NSAU NSAC Other	On-Site or Off-Site	LCAT	Hourly Rate	Hours Worked	Time Duration Worked (MM/DD/YYYY- MM/DD/YYYY)	Hours Under CARES	Time Duration Under CARES (MM/DD/YYYY- MM/DD/YYYY)	Total Hours Billed
									-
									-
									-



(U) Attachments: CARES Act Certification Memo

CARES Act Invoice: Contractor Certification

Contract # and Delivery Order #: _____

TTO(s) #: _____

Invoice #: _____

Invoice Total: _____

In submitting the above invoice, I certify that the charges are in compliance with the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Public Law 116-136, Section 3610, as well as all published Agency guidance on implementation of the CARES Act. The submitted costs comply with the following guidelines:

1. The individual(s) listed have been paid or will be paid for the hours claimed.
2. The individual(s) were performing on contract on or before 18 March 2020, when the Agency shifted Operational Status in response to the COVID-19 pandemic. Any exceptions to that start date have been approved in writing by the Contracting Officer and have been reported to the Primary COR.
3. The contractor's ability to work was restricted due to one of the following reasons:
 - a. as a direct result of the Agency's operating status due to the COVID-19 pandemic; or
 - b. due to the company's response to the COVID-19 pandemic to protect the health and safety of the workforce; or
 - c. due to quarantine or illness directly attributable to the COVID-19 pandemic
4. Hours not worked due to personal choice, non-COVID-19-related illness, or other reasons not covered above are not covered under this Act and may not be billed.
5. Hours billed in cumulative do not exceed an average of 40 hours per week per obligated FTE including sick leave or other leave. In cases where

the FTE support level is less than 40 hours per week, the hours billed do not exceed the usual hours expected per week.

6. The hourly rate(s) comply with your company's established accounting principles and shall not supersede any ceilings in the contract. Complying with the minimum applicable contractor billing rate guidance provided on the Acquisition Resource Center (ARC).

I certify all charges tendered in this invoice have not, and will not receive credit for the amount requested pursuant to division G of Public Law 116-127 or any credits allowed under the CARES Act, Public Law 116-136.

I certify that the request is made in good faith, and that the supporting data are accurate and complete to the best of my knowledge and belief.

Contractor Company: _____

Contractor POC and Phone #: _____

Contractor POC Position/Title: _____

Contractor Signature: _____

Date: _____

End of document ■



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(U) Attachments: SPF1034/1035

Standard Form 1034 Revised October 1997 Department of the Treasury 1 TFM 4-2000		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL				VOUCHER NUMBER 543	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION Finance and Accounting Office 9800 Savage RD			DATE VOUCHER PREPARED 04/07/2020		SCHEDULE NUMBER		
			CONTRACT NUMBER AND DATE H98230-XX-X-XXXX		PAID BY		
			REQUISITION NUMBER AND DATE				
PAYEE'S NAME AND ADDRESS ABC LLC 125 Rolling Stones Av					DATE INVOICE RECEIVED		
					DISCOUNT TERMS		
					PAYEE'S ACCOUNT NUMBER		
					GOVERNMENT B/L NUMBER		
SHIPPED FROM		TO		WEIGHT			
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT (1)	
				COST	PER		
	03/27/2020 to 04/15/2020	CARES ACT - Invoice 543 CARES		170,000		170,000	
		Other Charges - Invoice 543		25,573.25		25,573.25	
(Use continuation sheet(s) if necessary)				TOTAL		195,573.25	
PAYMENT:		APPROVED FOR	EXCHANGE RATE	DIFF			

Note: Total should match vendor support attached with this.

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(U) Invoice Review

Immediately reject invoice if:

- (U) If CARES is not noted in the invoice number and description
- (U) Support for CARES is not attached (Excel template, memo, SF1034/1035, vendor support)
 - (U) note if dates on all support are not supported by the attachments the invoice will be rejected
- (U) Does not fall within Period of Performance of the contract
 - (U) Charges on support need to fall within the billing period
- (U) Wrong CLIN/SLIN/ACRN
- (U) No date or inconsistent dates on supporting documentation
- (U) Wrong invoice
- (U) Wrong amount (price/cost)
- (U) Inflated hours
- (U) Mathematical errors
- (U) Unsupported other direct costs (ODC)
- (U) Inadequate description (description must match the contract)
- (U) Duplicate invoices