IVI	ENT REPORT SCREENING/PROCESSING CHECKLIST
	Contract #
S	SCREENING
F	PR # is in sequence (if NO then reject)
C	Contract # is correct
F	Prime Consultant's name is correct
Ν	Month Ending is in sequence (if No then reject)
"	Vendor Code IV/PZ000000000" is listed
C	One PR per month is received, unless exceptions noted
F	PR is signed by consultant (if NO then reject)
F	PR is signed by PM (if NO then reject)
E	3U provided (if NO then reject)
E	3U is for 1 month period (if NO then reject)
F	Receipts do not contain Alcohol (if YES then reject)
L	.og PR into eCMS (x.xx; ME xx/xx/xx)
F	ile in cabinet
P	PROCESSING
F	Prime Consultant Name matches eCMS
Ν	NTP & Completion Dates match eCMS
C	Contract Amounts are correct for the current PR date
P	PO Line Numbers are correct
Т	Task Order Numbers are correct 🛛 🔲 N/A
F	Project Numbers are correct
	Previous, Current Billed & Total Amounts are correct
	Dverhead is correct IN/A
0	Direct Expenses are allowed 🛛 N/A
	Progess Report/Billing Summary included
E	CS Travel form included N/A
F	Receipts/Invoices included N/A
	AFIS Funds are available
Þ	
	PM'S
P	PM'S Project Number is correct
P	-
F F	Project Number is correct
P F T	Project Number is correct

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NOTE: This document is provided as a guideline and is not intended to be an all-inclusive checklist as specific contracts may vary. Please contact ECS to discuss specific contracts.