NOTES FOR USERS OF AG173

Supplier to complete the front page of the form

Ideally all fields should be typed if not they should be printed in block capitals using black ink one character per box

Field 1 - Supplier Title
*Mandatory Field. The title of the Company **must** be the same as on the contract.*
Field 2 - Address
Mandatory Field. Please complete with the address quoted on the contract.
Field 3 - Supplier Code
*Mandatory Field. Correct Supplier code **must** be quoted.*
Field 4 - Contract Number
*Mandatory Field. Contract number **must** be exactly as quoted on the contract (max 14 characters).*
Field 5 - Supplier Reference
*Mandatory Field. This reference **must** be meaningful and unique to each invoice so it can be used to locate and resolve queries (max 10 characters). **Not adhering to this requirement may lead to a delay in payment.***
Field 6 - Date of invoice
This field is for supplier use only and should quote the date the invoice was raised.
Field 7 - Order Number
If the delivery invoice relates to a specific MOD order then the order number must be input here.
Field 8 Currency
Mandatory Field. Please quote the currency to be used for payment i.e GBP/USD etc.
Field 9 - Item Number
The item number of the goods or service being claimed as it appears in the contract document.
Field 10 – Quantity
The quantity of the goods or number of times the service is being claimed should be inserted in this box.
Field 11 – Price excluding VAT (each)
The price to be claimed for each item or service.
Field 12 - Value
This field should be calculated from the quantity of the item/ service claimed x the individual price.
Field 13 - Description

A description of the goods or services being claimed should be inserted in this box.
Field 14 - VAT Registration Number
Please insert your valid VAT registration number.
Field 15 - Total Excluding VAT
Please insert the total value of all the items claimed on the invoice excluding VAT.
Field 16 - VAT %
Please insert the VAT rate applicable for the claim.
Field 17 - Total
Please insert the total value of VAT claimed.
Field 18 - Grand Total
The total amount of the invoice including VAT

Reverse of AG173 to be completed by MOD Certifying Officer
(This version of the form incorporates fields from the previous AG173, AG173F & AG173G).

For all standard AG173 claims the following fields are mandatory

25 - UIN
*This is a mandatory field and **must** be completed with a valid unit identity number.*
26 - **MOD Reference**
*This is a mandatory field and **must** be completed with a meaningful unique reference.*

If the AG 173 requires the value to be split i.e by RAC or UIN the Certifying Officer should complete the appropriate fields to record the split.

For all claims that previously required completion of an AG173F or AG173G

Field 19 - Item
Please use field if applicable
Field 20 - Cost
Please use field if applicable
Field 21 - RAC
Please enter a valid Resource Account Code.
Field 22 - SAC
Please enter a valid Secondary Analysis Code if required.
Field 23 - VAT
Please enter a valid VAT code.
Field 24 - LPC
If required please enter a valid Local Project Code.

Field 25 - UIN
*This is a **mandatory** field and **must** be completed with a valid Unit Identity Number.*
Field 26 - MOD Reference
*This is a **mandatory** field and **must** be completed with a meaningful unique reference.*
Field 27 - Value
The value of the item(s) excluding VAT
Field 28 - VAT
The VAT value claimed on this line
Field 29 - Total
Total value of the item(s) including VAT.
Field 30 – Grand Total
This should show the total of boxes 29 A-E and should agree with the total in box 18 on the front of the form.

If a BX131 form is attached for breakdown purposes please tick box

Certification Box

*All fields are **mandatory**, the date of invoice field **must** be completed with the date the AG173 form was received or the goods or services delivered/completed if this was later. Date format used **must** be **DDMMYYYY***
*The Certifying Officer must sign with an original signature and print their name, complete the Official stamp field, enter the Branch email address, contact telephone number and date of certification in the format **DDMMYYYY**, in the fields provided.*