

NOTES FOR USERS OF AG210

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 Invoice Reference

Mandatory Field. *This reference **must** be meaningful and unique to the 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

The order number claimed for on the invoice should be quoted 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 number attributed to the item/stage being claimed should be quoted here.

Field 10 – Quantity

The number of items or the stage being claimed should be quoted here.

Field 11 – Sum Claimed Each

The price to be claimed for each item or stage.

Field 12 – Total Sum Claimed

The total price claimed for the item(s) or stage(s).

Field 13 – Description

Please insert a full and detailed description of the item/stage being claimed for on the invoice.

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 item(s) or stage(s) claimed for 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

Please insert the total amount of the invoice including VAT.

Reverse of AG210

Signature Box to be completed by the Supplier

*All fields are **mandatory**, an original signature must be completed and the name printed in Block Capitals. Please also include the signatory's capacity within the company to sign the invoice, full Supplier Title and full contact telephone number. The Date of Signature field should be completed in the following format **DDMMYYYY**.*

Part B to be completed by the Authorised Certifying Officer

In accordance with previous versions of the AG210 there is the facility to split the invoice between different RAC codes. To facilitate this activity please complete fields 19A to 27A for the first RAC, 19B to 27B for the second RAC etc.

Field 19 – Item/Stage

Please enter the item number or stage.

Field 20 – Quantity/%

Please enter the number of items claimed or the percentage of stage claimed against the RAC.

Field 21 - RAC

Please enter a valid Resource Account Code.

Field 22 – UIN

*This is a **mandatory** field and **must** be completed with a valid unit identity number.*

Field 23 – MOD Reference

*This is a mandatory field and **must** be completed with a meaningful unique reference.*

Field 24 – VAT Code

Please enter the VAT code applicable for the item or stage.

Field 25 – Stores

The value claimed for the item or stage excluding VAT.

Field 26 – VAT

The VAT value claimed for the item or stage.

Field 27 – Total

The total value claimed for the item or stage including VAT

Field 28 – Grand Total

This should show the total of boxes 19 A-D 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 AG210 form was received or the goods or stage 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, the branch email address, contact telephone number and date of certification in the format **DDMMYYYY**, in the fields provided.*

