

ADMINISTRATIVE DIFFERENCE STATEMENT

IN REPLY REFER TO (Order/ACT No.)

Note to preparer: This form may be used in a standard No. 10 window envelope. Type or print the address immediately below and between the dots. The bottom line of the address must be at least 5/8" from the dotted fold line.

VENDOR NUMBER

INVOICE NUMBER

TO:

AMOUNT INVOICED

\$

AMOUNT DEDUCTED

\$

PAYMENT AMOUNT

\$

EXPLANATION OF DEDCTION (Applicable items checked)

DEDUCTION

Billed for: _____ Line item/NSN: _____
Received: _____

\$

Billed for: _____ @ _____
Should be: _____ @ _____

\$

Contract line item number (CLIN) is not in agreement with invoice.
Order Amount: _____ CLIN No.: _____

\$

Purchase order states FOB destination. Freight charges deducted.

\$

GSA is an agency of the U.S. Government and is exempt from taxation by State and local Governments.

\$

Discount taken: _____

\$

Forward a copy of a prepaid freight bill to verify transportation charges.

\$

Other deductions:

TOTAL DEDUCTION

\$

RE-INVOICE WHEN THE SHORTAGE OR DEFECT IS CORRECTED

RETURN INVOICES TO:
GENERAL SERVICES ADMINISTRATION

SIGNATURE OF TECHNICAL

DATE

NAME OF TECHNICAL (Type or print)

TELEPHONE NUMBER