



CAMP Invoicing Guidelines – Seven Steps to Timely Payment

#1 – Get setup properly as a vendor with CAMP (reference your MSA pack).

#2 – Complete your invoice. Be sure to include all the following mandatory fields and attachments:

<input type="checkbox"/> Subcontractor Company Name	<input type="checkbox"/> Purchase Order (PO) Number
<input type="checkbox"/> Subcontractor Address	<input type="checkbox"/> Job Number/Name
<input type="checkbox"/> Invoice Number (<u>no duplicates</u>)	<input type="checkbox"/> Description of Service Provided
<input type="checkbox"/> Invoice Date	<input type="checkbox"/> Price of Service
<input type="checkbox"/> Bill To: Camp Facility Services	<input type="checkbox"/> Total of All Lines
<input type="checkbox"/> Camp Office Location Served	<input type="checkbox"/> Attach progress lien waiver

#3 – Make sure your invoice follows the line items and specific instructions from CAMP’s purchase order (Note: reference the example on the following pages). Ask your CAMP Project Manager if he or she would like to review a draft of your invoice prior to submittal.

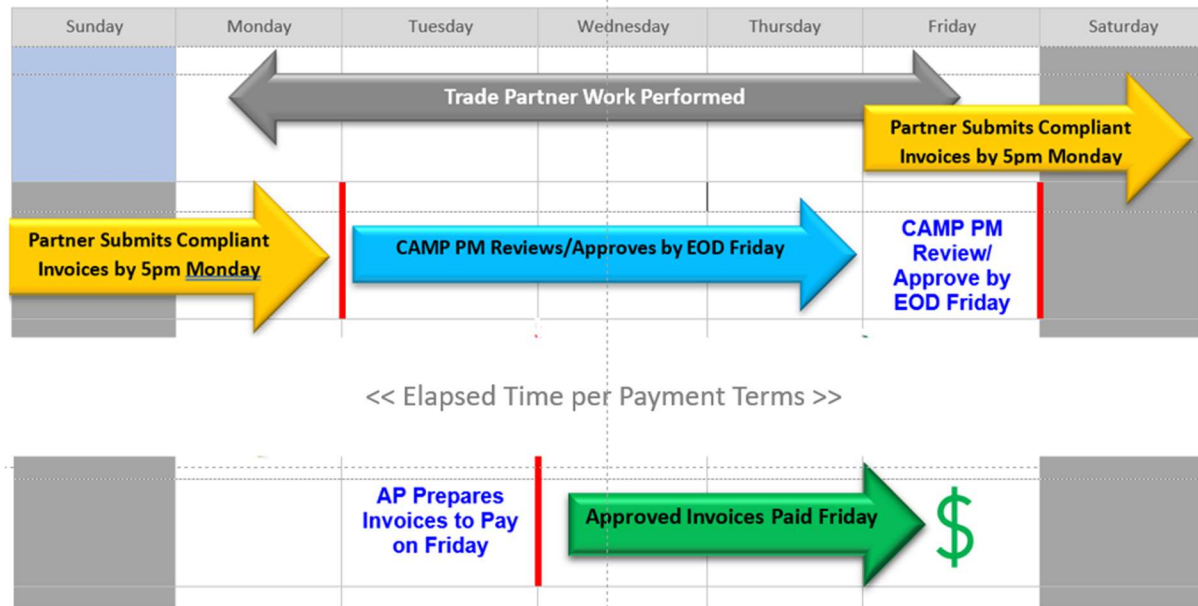
#4 – Submit a progress lien waiver with every invoice. Lien waivers must include CAMP’s purchase order number. If required by the State, please ensure the lien waiver is notarized.

#5 – Email invoice (including lien waivers) as PDF attachment to subinvoices@campfs.com. **Note:** Invoices received in any other format will not be processed.

#6 – Your CAMP Project Manager and Superintendent will review and approve invoices.

#7 – CAMP processes payments on Fridays for Compliant/Approved Invoices.

A timeline for the process is shown on the calendar below and depicts deadlines for invoice submittals. If you have any questions about completing your invoice, please contact your CAMP Project Manager.





PURCHASE ORDER

Page: 1

Purchase Order
Purchase Order Date:

PO-012350
2/29/2024

To: Joe Blow Construction LLC
123 Happy Hill Court
Houston, TX 77077

Job
Job Address

JOB-012345 Apartment
Pearland Apartments
123 Main St
Pearland, TX 77538

No.	Description	Qty	Unit Cost	Total
10000	DEMO SUB- DEMOLITION OF KITCHEN CABINETS	20	300.00	6,000.00
20000	DRYWALL SUB- DRYWALL PATCH LAUNDRY ROOMS	10	150.00	1,500.00
30000	INT UNIT SUB CO FF-12345 INSTALL 2 MIRRORS BATHROOMS	20	25.00	500.00
40000	GEN LAB SUB CO FF-23456 TRASH OUT UNIT 231	1	1,500.00	1,500.00

INVOICING SHOULD CLEARLY MATCH DESCRIPTION LINES ABOVE AND INVOICES WILL BE ACCEPTED AS INDIVIDUAL UNITS ARE COMPLETED.

EXAMPLE ATTACHED

Total Amount: 9,500.00

Inclusions: Tools, Equipment, Labor, Safety, Incidentals, Supervision

Exclusions: CAMP supplied equipment & materials, Roofing felt, Shingles, Metal & Roofing nails, Temporary toilet

The following attachments are incorporated into this purchase order:

- EXHIBIT A - Scope of Work
- EXHIBIT B - Construction Schedule
- EXHIBIT C - Additional Insurance Requirements

CAMP and Subcontractor have previously entered into a Master Subcontract Agreement which provides the terms and conditions applicable to his purchase order.

Signature Date

Print Name & Title

Your Company Name*

Street Address*:

City*:

State*:

Zip*:

Phone*:

Email*:

INVOICE

INVOICE NO*: _____

INVOICE DATE*: _____

DUE DATE*: _____

TO:

Camp Construction Services
15139 South Post Oak Rd.
Houston, TX 77053
AP Email:

SERVICE TO*:

Camp Location Name:
Camp address:
Street:
City: State: Zip:

COMMENTS OR SPECIAL INSTRUCTIONS:

Blue text indicates fields to provide specific to your company and service location. Print extra pages if needed.

Note any Waivers related to Job.

* Indicates a required field.

If required fields are incomplete, vendor terms will not be met.

JOB NAME *	P.O. NUMBER *	JOB NUMBER *				TERMS*
PEARLAND APARTMENTS	012350	012345				

QUANTITY	DESCRIPTION OF ITEM OR SERVICE*	UNIT PRICE	TOTAL*
5	DEMO SUB- DEMOLITION OF KITCHEN CABINETS	300	1500
2	DRYWALL SUB- DRYWALL PATCH LAUNDRY ROOMS	150	300
	DEMO UNITS COMPLETED- 1A, 2A,13B, 23A & 14C		
	DRWALL UNITS COMPLETED- 24C & 8A		
		SUBTOTAL	1800
		SALES TAX (IF APPLICABLE)	
		TOTAL DUE*	1800

Make all checks payable to **Company Name***:

If you have any questions concerning this invoice, contact: **Name:** **Phone:** **Email:**