



North Carolina Department of Public Safety Direct Processing Form

Form No. _____

Location Name _____

Number _____

1901 General Fund 1902 1907 Enterprise 19 Cl's

Job Order #, if applicable _____

Section A. Type of Purchase Request

- Open/Blanket PO
PO # _____
- Small Purchase/Direct Invoice as authorized by Purchasing policy
- Independent Contractor
PO # _____
- Emergency/Pressing Need (Non-Declared Emergency) After Business Hours (Provide Justification & Section/Location Head approval)

Section B. Vendor Information

Name _____

Remit to Address _____

City _____

State _____ Zip Code _____

Vendor # _____ Group # _____

Change of Address New Vendor Attach W-9

Invoice Number	Invoice Date	Account	Year	Center	Invoice Amount
Total:					

Printed/Typed Name	Signature	Date	Phone Number
Requester _____	_____	_____	_____
Approver _____	_____	_____	_____

Justification/Remarks:

Original: Controller's Office; Copy:

The Direct Processing Form (CNTR 005) shall be completed in its entirety before submitting to the Controller's Office for payment.

COMPLETE THE FOLLOWING INFORMATION:

1. The 10-digit CNTR 005 Form Number: This number is assigned by the individual keeping the Direct Processing Form Log for the Section/Location. The first 4 digits will be the specific RCC; the next 2 digits will be the fiscal year; and the final 4 digits will be the sequential number assigned.

Examples:

- Central Prison's first CNTR 005 number for the 12-13 FY will be 3100130001 (3100 is the RCC, 13 is the fiscal year and 0001 is the sequential #).
- MIS will use number 1140140121 for the 121st purchase in FY 13-14 (1140 is the RCC, 14 is the fiscal year and 0121 is the sequential #).

2. Location Name: Enter the location or section name such as "Central Prison" or "MIS"

3. Company: Check the box of the applicable company number.

4. Job Order No.: Enter the 4-digit Job Order Number if applicable.

5. Type of Purchase Request: Check the applicable box.

- a) If the request is to pay on a "blanket" or "open" purchase order (other than an Independent Contractor), enter the Purchase Order No. in the space provided.
- b) If the request is for a small purchase or direct invoice as authorized by Purchasing and Logistics Policy, check the box.
- c) If the request is to pay an invoice for an independent contractor, provide the Purchase Order No. in the space provided.
- d) If a request is for a purchase related to a non-declared emergency or pressing need after business hours, provide justification for the purchase and Section/Location Head approval.

6. Vendor Information:

- a) Enter the Vendor Name and "Remit to" Address;
- b) If requester has access to NCAS, enter the Vendor Number and Group Number;
- c) If the vendor is new, leave the Group Number blank and check the New Vendor box; and
- d) If the vendor is new or if the vendor has a name or address change, the requester shall have the vendor supply a completed Internal Revenue Service Form W-9 - Request for Taxpayer Identification and Certification to the requesting Section/Location. Attach the Form W-9 to the CNTR 005 before submitting the Direct Processing Form to the Controller's Office for payment.

7. Invoice Information: Complete the specific information related to the invoice.

- a) Invoice Number;
- b) Invoice Date;
- c) Account Number (See Accounts Payable Policy - Account Distributions and Coding Invoices);
- d) Account Center (See Accounts Payable Policy - Account Distributions and Coding Invoices); and
- e) Invoice Amount.

NOTE: All invoices should be verified before submitting to the Controller's Office. Confirm quantities and price extensions. Please see Accounts Payable Policy - Direct Processing Payments VIII for procedures on correcting invoice errors.

8. Justification/Remarks: Complete any justification or additional information when required. If the purchase is for vehicle or equipment repairs, the Fixed Asset Number should be provided in this space.

9. Signatures and Approvals:

- a) Requestor - The Requestor is the person initiating the Direct Processing Form (CNTR 005). He or she shall sign and date the form in the space provided. The requestor shall also provide their telephone number.
- b) Approver - The Approver is one who is authorized by policy to approve such purchases. By signing and dating the form, the approver is not only approving the form, but is also attesting that the use of the Direct Processing Form follows normal purchasing policy and procedures. The telephone number shall also be provided for the approver.

10. Submission of the Direct Processing Form (CNTR 005): Once the Form CNTR 005 has been completed, including all required signatures and approvals, the CNTR 005, along with all documentation including the vendor invoice, shall be forwarded to the Controller's Office for payment: NC Department of Public Safety, Controller's Office, 2020 Yonkers Road, MSC 4220, Raleigh, NC 27699-4220.