

MDX Invoice Tracking Form
[Name of Consultant/Contractor]

MDX Contract/TA/WO No.: _____
 MDX Contract/TA/WO Amount¹: _____
 MDX Contract/TA/WO Amount for SB/LB Requirement²: _____
 Total Amount Invoiced to Date²: _____
 MDX Work Program No.: _____

Invoice No.: _____
 Invoice Date: _____
 Invoice Accrual Amount: _____
 Invoice Period: _____

| | | |
|--|----------------|----------------|
| | Small Business | Local Business |
| MDX Contract/TA/WO Requirement ³ : | | |
| % Based on Contract/TA/WO Amount for SB/LB Amount: _____ | | |
| % Based on Invoiced to Date: _____ | | |

FAILURE TO PROVIDE THE REQUESTED INFORMATION AS PART OF THE INVOICE SHALL DELAY PROCESSING OF INVOICE(S).

Notes:

- ¹MDX Contract/TA/WO Amount is the total authorized amount of the Contract, or Task Authorization (TA) or Work Order (WO) in the case of TA/WO driven contracts, as amended from time to time.
- ²Total amount invoiced to date must include all amounts invoiced by Prime and all Subcontractor/Subconsultant firms to date under the Contract, or under the specific TA or WO in the case of TA/WO driven contracts, including retainage.
- ³MDX Contract/TA/WO Requirements must reflect the required SB/LB utilization for the Contract or for the specific TA or WO in the case of TA/WO driven contracts.

Tables below must include information for the Prime and ALL approved Subcontractors/Subconsultants of the Prime and have checked ALL certifications that apply.
 If a Subcontractor/Subconsultant is not invoicing during the Invoice Period, indicate by inserting "\$0.00" in the line item section entitled Invoice Amount This Period.

| SB Firms | Committed Utilization Amount | Check "x" all boxes that apply | | | | | | | | | | | Previous Invoiced Amount | Invoiced Amount This Period | Invoiced Amount To Date | Description of Services | |
|--------------------------------|------------------------------|--------------------------------|----------|--------|----|-----|-----|---|---|---|-------|--|--------------------------|-----------------------------|-------------------------|-------------------------|--|
| | | SBE/AE | SBE/CONS | SBE/GS | LB | DBE | MBE | B | H | W | OTHER | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| SB Total | | | | | | | | | | | | | | | | | |
| LB Firms | Committed Utilization Amount | Check "x" all boxes that apply | | | | | | | | | | | Previous Invoiced Amount | Invoiced Amount This Period | Invoiced Amount To Date | Description of Services | |
| | | SBE/AE | SBE/CONS | SBE/GS | LB | DBE | MBE | B | H | W | OTHER | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| LB Total | | | | | | | | | | | | | | | | | |
| Remainder of Team | Estimated Utilization Amount | Check "x" all boxes that apply | | | | | | | | | | | Previous Invoiced Amount | Invoiced Amount This Period | Invoiced Amount To Date | Description of Services | |
| | | SBE/AE | SBE/CONS | SBE/GS | LB | DBE | MBE | B | H | W | OTHER | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Remainder of Team Total | | | | | | | | | | | | | | | | | |
| Combined Total | | | | | | | | | | | | | | | | | |

MDX APPROVED CERTIFICATIONS PURSUANT TO MIAMI-DADE COUNTY'S SMALL BUSINESS PROGRAM
 SBE/AE: Small Business Enterprise - Architectural & Engineering
 SBE/CONS: Small Business Enterprise - Construction
 SBE/GS: Small Business Enterprise - Goods and Services

MDX APPROVED CERTIFICATIONS PURSUANT TO THE MDX LOCAL BUSINESS PARTICIPATION POLICY
 LB: Local Business

FEDERAL/STATE PROGRAM: Ownership/control of firm of 51% or greater by a minority.
 DBE: Disadvantaged Business Enterprise
 MBE: Minority Business Enterprise
 B: Black
 H: Hispanic
 W: Women-Owned.

CERTIFICATION:

I hereby certify that the information provided in this form is submitted in good faith, to the Contractor/Consultant's best knowledge and belief.

| | |
|----------------------|-------|
| Authorized Signatory | Title |
| Print Name | Date |



MIAMI-DADE EXPRESSWAY AUTHORITY

3790 NW 21 St. // Miami, FL 33142

www.mdxway.com

Instructions to complete: MDX Invoice Tracking Form

Intent:

- The intent of this form is to:
- a) Provide a breakdown of all work to be completed by the Prime and the work to be completed by the subcontractors/subconsultants/suppliers; and
 - b) Track the Small Business/Local Business that may apply to the Contract.

Instructions:

- A) Name of the Prime Contractor/Consultant.
- B) Include MDX Contract/TA/WO No. as applicable.
Examples: RFP-13-01; RFP-13-01/FY13/TA-01; RFP-13-01/FY13/WO-01 as applicable.
- C) Refer to Note 1 on this form.
- D) Amount for SB and LB Requirement.
- E) Refer to Note 2 on this form. This field is calculated automatically based on the Invoiced Amount to Date column.
- F) Include Work Program Number (112XX.XXX, 836XX.XXX, 874XX.XXX, 878XX.XXX, 924XX.XXX).
- G) Unique number, as assigned by Contractor/Consultant, identifying invoice submitted for payment.
- H) Date invoice is prepared, as reflected on the actual invoice.
- I) Amount earned during the period covered by the invoice, inclusive of retainage, when applicable.
- J) The month in which work being invoiced was performed.
- K) Include MDX Contract/TA/WO Small Business/Local Business requirements as applicable (refer to Note 3 on this form).
- L) List ALL subcontractors/subconsultants/suppliers and the Prime under the corresponding classification as SB, LB or Remainder of Team.

The same company cannot be listed under both the SB and LB classification.

The Prime may be listed under the SB and Remainder of Team or under the LB and Remainder of Team classification based on how the Contract/TA/WO requirements are to be met.

**Instructions to complete:
MDX Invoice Tracking Form**

- M) Include the amount committed to each subcontractor/subconsultant/supplier and Prime. Combined Total amount must match the MDX Contract/TA/WO amount listed under (C)
- N) Check all applicable certifications for each subcontractor/subconsultant/supplier and Prime.
- O) Complete these columns with pertaining information for each subcontractor/subconsultant/supplier and Prime.

Refer to instructions located below the notes on this form.
- P) Include a brief description of the work assigned to each subcontractor/subconsultant/supplier.
- Q) Authorized Officer to contractually bind and enter into contractual arrangements and/or agreements on behalf of the company.

PLEASE NOTE:

The MDX Invoice Tracking Form has been attached in Excel format to this file.