

# Accurate Supplier Invoice Requirements

Oklahoma State University A&M System

**Oklahoma State Statues require an accurate and proper invoice be submitted by the Supplier.**

**Invoices** - Your invoice must contain the following items:

1. University Purchase Order (PO) number (PXXXXXXX)
  - invoices cannot be paid without a PO being issued.
  - per Oklahoma State statutes (O.S 62).
2. Itemized list of goods/services provided.
3. Supplier name – must match the supplier's name on the purchase order.
4. Bill to address – must be sent to the institution, not a person, at the address indicated on the purchase order.
5. Proper invoice date – must be dated after the PO issue date.
6. Suppliers invoice number.
7. OSUA&M contract number, if applicable
8. Remit address - must match the remit address in the OSU and A&M system supplier record.
9. Include the current total due for services rendered or goods delivered.
10. Upon submission of an accurate and proper invoice, the invoice shall be paid in arrears after products have been delivered or services provided.
11. An invoice is considered proper if sent to the proper recipient and goods or services have been received.
12. All institutions within the A&M System are exempt from sales taxes and federal excise taxes.
13. Pursuant to 74 O.S. §85.44B, invoices will be paid in arrears after products have been delivered or services provided.
14. Payment terms will be Net 30-days.

Questions should be directed to [purchase@okstate.edu](mailto:purchase@okstate.edu)  
Phone: 405-744-5984.

**SAMPLE PROPER INVOICE CAN BE SEEN ON THE NEXT PAGE**

# INVOICE



Logo  
Name

**DATE**

Invoice Creation Date

**INVOICE NO**

Company Invoice #

**Company Name (As on W9)**

Street Address

City, ST ZIP Code

Phone

Fax

Email

**INVOICE TO**

University Name on the PO  
Name of Department on the PO  
ATTN: Contact on the PO  
Phone # on the PO  
Email on the PO

**Purchase Order:**

PXXXXXXX

**OSUA&M Contract Number**

OSUA&amp;M-MISC-000XXX-2024

SALESPERSON	S/H	PAYMENT TERMS	DUUE DATE
(Optional, but helpful)	FOB Destination	Net 30-Days	Date (30 Days from Date of Invoice)

QUANTITY	DESCRIPTION	UNIT PRICE	LINE TOTAL
144	Example: Various promotional product items - Undergraduate Admissions	\$3.29	\$473.76
Product	Product description	\$Amount	\$Amount
Product	Product description	\$Amount	\$Amount
		Subtotal	
		Sales Tax	EXEMPT
		Total	

**Make check payable to:**Name of Business (Must match company name of the PO)Remit To: (If different from the company address above)

Company Name

Address

City, State, Zip