



INVOICE APPLICATION

UNLOCKING TALENT
DELIVERING RESULTS

UiTM TECHNOVENTURE SDN. BHD. Registration No. 201101020378 (948513-M)

Project no. : UTVSB/CS/P. _____
Doc Date : _____

For UTV use only (Receive date)

UiTM Technoventure Sdn. Bhd. (948513-M)
Ground Floor, UiTM-MTDC Technopreneur Centre
Universiti Teknologi MARA (UiTM)
40450 Shah Alam

**Please complete the information below to avoid process delay.

PROJECT TITLE: _____

NAME OF PROJECT LEADER: _____

PROJECT LEADER EMAIL ADDRESS : _____

PROJECT COMPLETION PERCENTAGE TO DATE(%): _____

INVOICE PURPOSE (Please tick the relevant item) :

Professional fees Reimbursable Project Phase No : _____ Upon signing Others

Please submit to UTV:

Client's Purchase Order (PO); **OR**

Approval for invoice by client (email, letter, payment schedule, etc.)

INVOICE DETAILS:

1. Sub Total (amount) : RM _____
2. GST/SST (6%/8%) (if applicable) : RM _____
3. Total Invoice (including GST/SST) : RM _____
4. Invoice details : _____
5. Client's name (person in charge) : _____
6. Client's phone no. : _____
7. Client's email (*to send invoice) : _____
8. Client's address : _____

Consultant declaration:

I hereby declare that;

1. I have completed and delivered the required task/report to the client.
2. Client has acknowledged the delivered task/report and ready to be invoiced.
3. All the information given above is true and correct.

CONSULTANT (compulsory to sign part A & B)		For UTV use only	
A.Prepared by:	B.Project Leader Endorsement:	Checked by:	Verified by:
NAME:	NAME:		
STAFF ID:	STAFF ID:		
TEL:	TEL:	DATE:	DATE:

**Invoice will be emailed to client by UTV Finance Department, unless hardcopy requested.

*You may email this form to consultancy@uitmtechnoventure.com.my.

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Form No: UTV/OPR/F-01/001
REV: 001

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