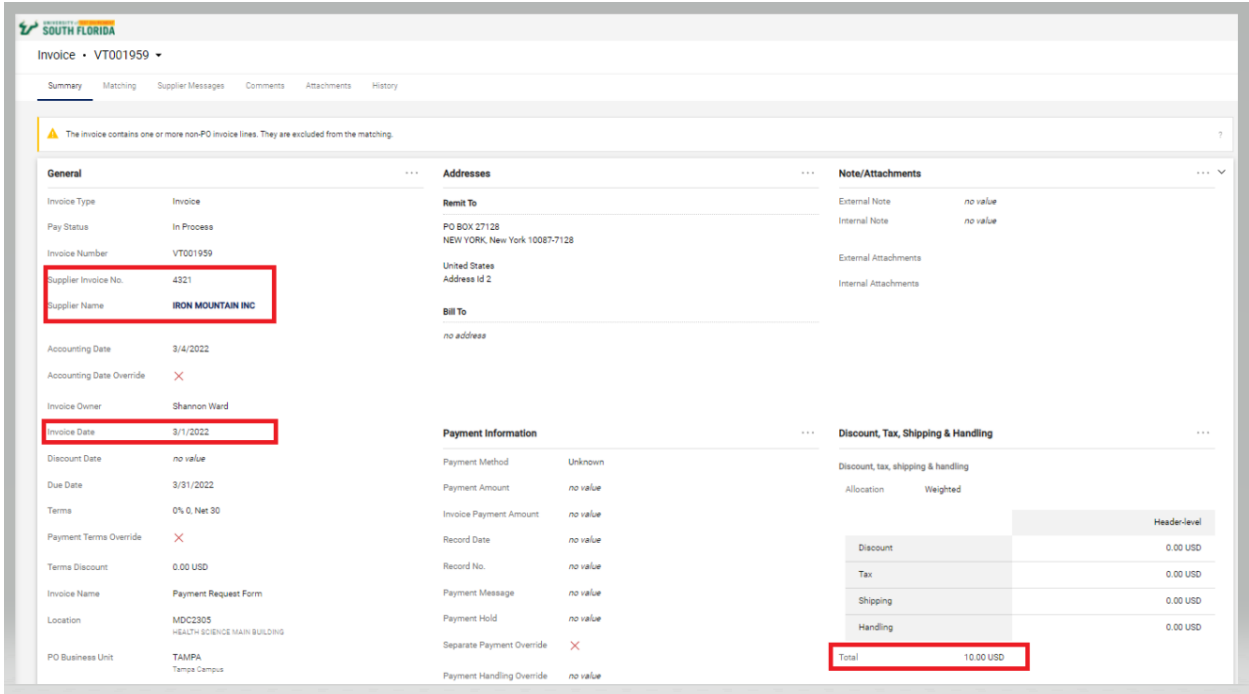


## Release 22.1 – Duplicate Invoice Check

### Example:

Payment Request VT001959 created with the following.

- Supplier: Iron Mountain
- Invoice Number: 4321
- Invoice Date: 03/01/2022
- Invoice Amount: \$10.00



Invoice - VT001959

Summary Matching Supplier Messages Comments Attachments History

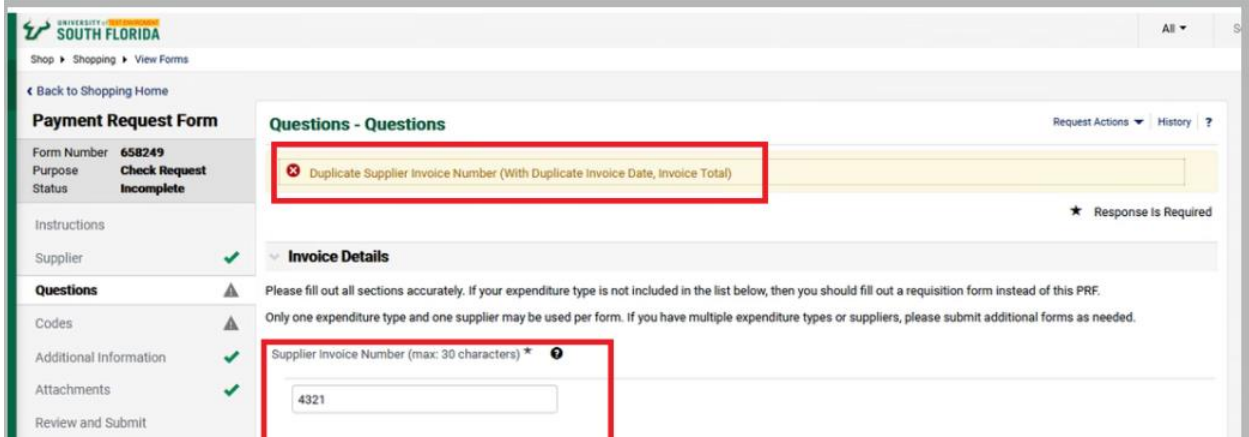
The invoice contains one or more non-PO invoice lines. They are excluded from the matching.

General	Addresses	Note/Attachments
Invoice Type: Invoice	Remit To: PO BOX 27128 NEW YORK, New York 10087-7128	External Note: no value Internal Note: no value
Pay Status: In Process	United States Address Id 2	External Attachments Internal Attachments
Invoice Number: VT001959	Bill To: no address	
Supplier Invoice No.: 4321		
Supplier Name: IRON MOUNTAIN INC		
Accounting Date: 3/4/2022		
Accounting Date Override: X		
Invoice Owner: Shannon Ward		
Invoice Date: 3/1/2022		
Discount Date: no value	Payment Information: Payment Method: Unknown	Discount, Tax, Shipping & Handling: Discount, tax, shipping & handling
Due Date: 3/31/2022	Payment Amount: no value	Allocation: Weighted
Terms: 0% 0, Net 30	Invoice Payment Amount: no value	
Payment Terms Override: X	Record Date: no value	
Terms Discount: 0.00 USD	Record No.: no value	
Invoice Name: Payment Request Form	Payment Message: no value	
Location: MDC2305 HEALTH SCIENCE MAIN BUILDING	Payment Hold: no value	
PO Business Unit: TAMPA Tampa Campus	Separate Payment Override: X	
	Payment Handling Override: no value	
		Header-level
		Discount: 0.00 USD
		Tax: 0.00 USD
		Shipping: 0.00 USD
		Handling: 0.00 USD
		Total: 10.00 USD

Attempt to create payment request 658249 with the following.

- Supplier: Iron Mountain
- Invoice Number: 4321
- Invoice Date: 03/01/2022
- Invoice Amount: \$10.00

Note: Received the message 'Duplicate Supplier Invoice Number (With Duplicate Invoice Date, Invoice Total)



Shop > Shopping > View Forms

Back to Shopping Home

Payment Request Form

Form Number: 658249  
Purpose: Check Request  
Status: Incomplete

Instructions  
Supplier: ✓

Questions  
Codes: ⚠  
Additional Information: ✓  
Attachments: ✓  
Review and Submit

Questions - Questions

Duplicate Supplier Invoice Number (With Duplicate Invoice Date, Invoice Total)

Response is Required

Invoice Details

Please fill out all sections accurately. If your expenditure type is not included in the list below, then you should fill out a requisition form instead of this PRF.  
Only one expenditure type and one supplier may be used per form. If you have multiple expenditure types or suppliers, please submit additional forms as needed.

Supplier Invoice Number (max: 30 characters) \*

4321