

INVOICE/APPENDIX A-XXXX-00X

to User Agreement No. _____

between **UT-BATTELLE, LLC (CONTRACTOR)** and

_____**(USER)**

Pursuant to the above-identified User Agreement and subject to the terms and conditions stated therein, CONTRACTOR shall provide, furnish, or otherwise make available to duly authorized employees or representatives of USER the following facilities, equipment, services, material and/or information for the following purpose.

| | |
|-------------------------------|--|
| Facility | |
| Purpose | |
| Term | The earlier of ___ years from date of last signature on this Appendix or termination of the User Agreement |
| Total Estimated Cost | \$ |
| Payment History | |
| Current Invoice Amount | \$ (DUE UPON RECEIPT) |
| Invoice #/Date | |
| ORNL Technical Contact | |
| Special Provisions | |
| Select One: | ___ Partial Cash Advance ___ Full Cash Advance ___ Full Cash Advance/Task-by-Task Basis (see payment schedule) |

To be completed by USER:

| | | |
|---|---|--------------------------|
| DUNS Number: _____ Organization Classification (select one) <input type="checkbox"/> U.S. Small Business <input type="checkbox"/> U.S. Large business <input type="checkbox"/> U.S. Non-profit Organization/University <input type="checkbox"/> U.S. National Laboratory <input type="checkbox"/> U.S. Federal Agency <input type="checkbox"/> Foreign <input type="checkbox"/> Other (specify) _____ | User Billing Address: User Purchase Order (if applicable): | Payment Schedule: |
|---|---|--------------------------|

| Proposed on behalf of USER | Accepted on behalf of CONTRACTOR |
|-----------------------------------|---|
| Signature: | Signature: |
| Name (print): | Name: Cindy Kendrick |
| Title (print): | Title: User Agreements Manager Sponsored Research Programs |
| Date: | Date: |

Payment Options (call 865-574-9103 with any questions):

| | |
|---|---|
| 1- Check payable to UT-Battelle, LLC Please return a copy of this page with your payment. | 2- Electronic transfer Please reference invoice number. |
| US Postal Service: UT-Battelle, LLC ATTN: Treasury Services MS-6437 P.O. Box 2008 Oak Ridge, TN 37831 FedEx/UPS: UT-Battelle, LLC ATTN: Treasury Services MS-6437 One Bethel Valley Road Oak Ridge, TN 37830 | Fedwire Instructions: Bank Name: US Treasury, New York, NY ABA: 021030004 Account Number/Agency Location Code: 89000001 Beneficiary: UT-Battelle, LLC, Oak Ridge, TN ACH Instructions: Depository Institution: Cashlink ACH Receiver – Federal Reserve Routing Transit Number 051036706 Account Name: UT-Battelle, LLC Account Number: 349010 Type of Account: Checking |