

**INVOICING, RECEIPT, ACCEPTANCE, AND PROPERTY TRANSFER  
(FORMERLY WIDE AREA WORKFLOW)  
ELECTRONIC RECEIVING REPORT AND INVOICING INSTRUCTIONS**

Questions concerning payment should be directed to the Defense Finance Accounting Services (DFAS) Columbus Customer Service at (800) 756-4571 or commercial (216) 522-6998. Please have your contract/order number and invoice number ready when calling about payment status.

- You can easily access payment information using <http://www.dfas.mil/contractorsvendors.html>.
- **DFAS Customer Service Points Of Contact:** The following website contains a current list of customer service phone numbers for all DFAS locations: <http://www.dfas.mil>

NOTE: In accordance with DFARS 232.7002, use of electronic payment requests is mandatory. Use of Wide Area Work Flow (WAWF) will allow you to monitor your payment status online. There are no charges or fees to use Invoicing, Receipt, Acceptance, and Property Transfer (iRAPT) (formerly WAWF).

**The following information will be required to route your receiving reports, invoices and additional e-mails correctly through iRAPT.**

General: Enter the following information to create an Invoice:

- |                                  |   |   |
|----------------------------------|---|---|
| a. <b>Contract Number:</b>       | <input type="text"/>                                      |   |
| b. <b>Delivery Order:</b>        | <input type="text"/>                                      | Delivery Order number found in block 2 of DD Form 1155          |
| c. <b>CAGE Code/Ext.:</b>        | <input type="text"/>                                      |   |
| d. <b>Pay DoDAAC:</b>            | <input type="text" value="F87700"/>                       |   |
| e. <b>Type of Document</b>       | <input type="text" value="Invoice and Receiving report"/> |   |
| f. <b>Inspection/Acceptance:</b> | <input type="text" value="Destination"/>                  |   |
| g. <b>Issue Date:</b>            | <input type="text"/>                                      | Award Date found in block 3 of DD Form 1155                     |
| h. <b>Issue By DODAAC:</b>       | <input type="text" value="HTC711"/>                       |   |
| i. <b>Admin DODAAC:</b>          | <input type="text" value="HTC711"/>                       |   |
| j. <b>Ship To Code</b>           | <input type="text" value="HTC711"/>                       | / Ext: <input type="text" value="Pick one of the codes below"/> |

- (1) **Missions and Passenger Taxes:** *TCAQCX*  
**All Other Reimbursables:** *TCAQCM*

**NOTE:** *You must enter Net 15 Days payment terms on the Discounts tab* (See training guide).

## FERRY/BACKHAUL DECLARATION

In accordance with section G-2.c of the contract, the following declaration is made in good faith and to the best of my knowledge. I verify the following ferry miles were actually flown in conjunction with the referenced mission.

Contract Number: \_\_\_\_\_

Delivery Order Number/SLIN: \_\_\_\_\_

Mission No./Julian and Calendar Date: \_\_\_\_\_

Aircraft Type and Tail: \_\_\_\_\_

Awarded Ferry: \_\_\_\_\_  
(Routing) (Miles)

Flown Ferry: \_\_\_\_\_  
(Routing) (Miles)

Awarded Backhaul: \_\_\_\_\_  
(Routing) (Miles)

Flown Backhaul: \_\_\_\_\_  
(Routing) (Miles)

Total Combined Awarded Ferry/Backhaul:

Total Combined Flown Ferry/Backhaul:

Carrier

Carrier address/Signature line

Name of signer/Title of Signer

Date: