



All Other Invoices – Checklist



ITEMS ON ALL OTHER INVOICES:

- Supplier Information * (Name, address and phone)
- Unique Invoice Number * (16 numeric or alphanumeric characters max)
- Invoice Date *
- Remit Payment To
- Bill-to Address * (Central Harley-Davidson mailing address effective January 1, 2007)
- Ship-to/Location Services Rendered Address *
- Contact Name * (First and Last Name of the Harley-Davidson or Buell person responsible for purchase. Should not appear in the Bill-to address field.)
- Existing Supplier ID Number *
- Date Shipped/Completed
- Payment Terms
- Description of goods/services *
- Quantity Shipped/Hours Completed *
- Unit/Hour Price *
- Total Dollar Amount Invoiced per Line Item *
- Total Invoiced Amount *

**Denotes required item*

NOTE: COMPLETING ALL FIELDS WILL STREAMLINE THE PROCESSING OF A SUPPLIER'S INVOICE.