

**EXHIBIT E**

***INVOICE DISCREPANCY REPORT***

**INVOICE DISCREPANCY REPORT**

1. **INVOICE DISCREPANCY** to be completed by County Program Director

Today's Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Subject Invoice: \_\_\_\_\_

Description of Issues with Subject Invoice:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
County Program Manager (CPM)

2. **REVIEWED:**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
County Program Director (CPD)

3. **CONTRACTOR RESPONSE** (to be completed by Contractor Program Director)

Date received from CPD: \_\_\_\_\_

Explanation regarding Issues with Subject Invoice: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Corrective Action Taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Contractor Program Director

4. **COUNTY EVALUATION** of Contractor's Response and Action taken.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **Approved by COUNTY:**

\_\_\_\_\_  
Date: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_\_

6. **Contractor Notified on** \_\_\_\_\_ (Date)

**INSTRUCTIONS**

CPM : Forward IDR to the Contractor for investigation and response.

Contractor: Must respond to CPD in writing within ten (10) days of receipt of IDR.

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