

*Prepare an original and two copies*

STATE DEPARTMENT NAME			
CONTACT PERSON <i>(Print)</i>		TELEPHONE NUMBER	
CONTRACTOR/VENDOR		DATE RECEIVED	PAYMENT ISSUE DATE
INVOICE NUMBER	INVOICE DATE	REFERENCE NUMBER(S)	CLAIM SCHEDULE NUMBER

**PART A: PENALTY CALCULATION**

STEP 1:  
 Payment Due Date .....

STEP 2:  
 Amount Subject to Penalty *(Excluding Sales Tax)* .....   
 Daily Penalty Rate .....

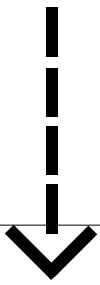
STEP 3:  
 Penalty Amount Per Day *(Multiply Subject Amount by Daily Penalty Rate)* .....

STEP 4:  
 Number of Days Penalized .....

STEP 5:  
 Penalty Amount *(Multiply Penalty Amount per day by Step 4) Enter the result here* ..... \$

Enter the Penalty amount below when the penalty is:

- Over \$10.00 for small businesses; nonprofit organizations, nonprofit public benefit corporations, refunds, or other payments due to individuals; or
- Over \$100.00 for all other businesses



**PART B: TOTAL PAYMENT**

PENALTY AMOUNT - Enter on Remittance Advice ..... \$

*Additional information to complete STD. 208 are in SAM Section 8474.3*