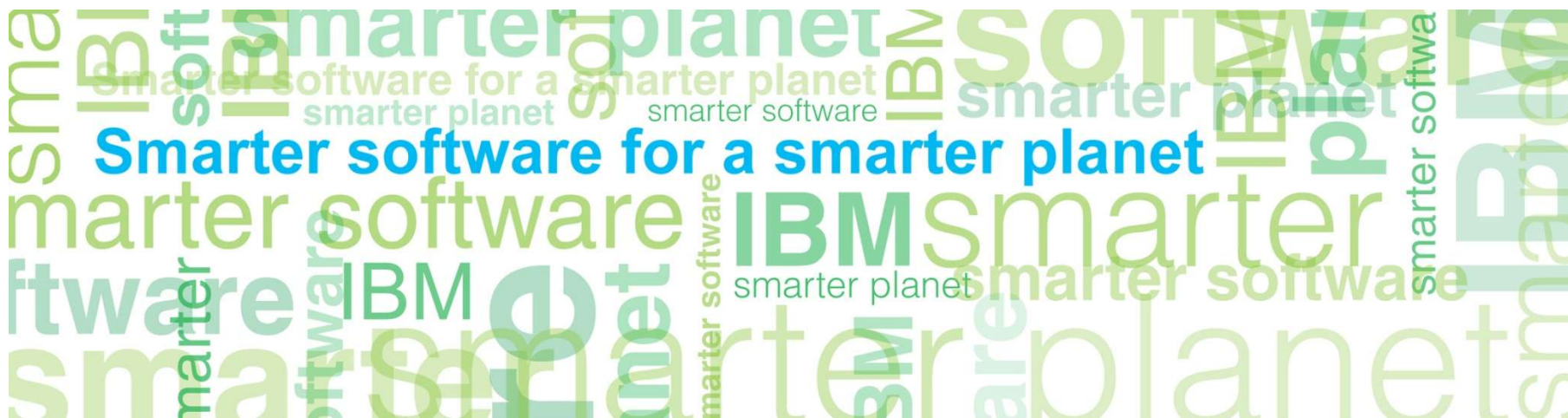


Intelligens számlafeldolgozás

Accounts Payable Taskmaster (APT)

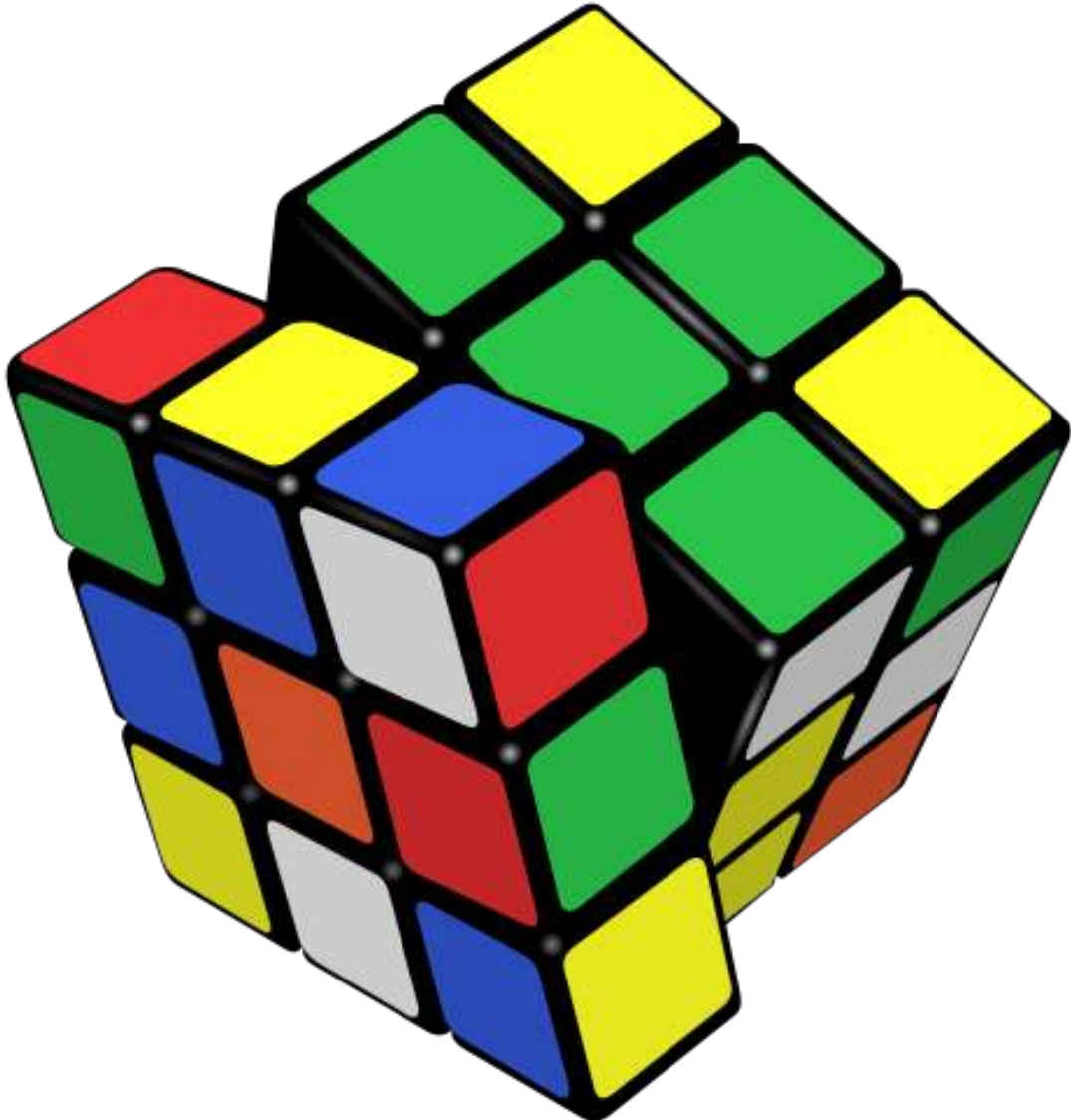
Előadó: Kovács Orsolya / Contum Kft. szoftver üzletág – Ypsilon Solution

Időpont: 2011.09.22.



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Szállító: neve: Próba Kft.
 címe: 1023 Budapest, Petőfi utca 2

GO TIRES AUTO REPAIR

AA 158115
 4007 Stockton Blvd., Sacramento, CA 95820
 Open Hours 9:00 AM - 7:00 PM • Tel: (916) 455-9434

1879

- Total 4 Wheel Alignment
- Auto Repair
- Sell New & Used Tires
- Air Conditioning Service
- Computer Balancing Service

NAME: CASEY SERIN PHONE: _____
 ADDRESS: _____ CITY: _____
 STATE: _____ ZIP: _____

TIME PROMISED: _____ A.M. _____ P.M.
 DATE: 03/10/10
 MAKE: Subaru LICENSE: _____
 MODEL: Subaru SPEEDOMETER: 99,438
 VIN: 4B3UB95120A000000

DESCRIPTION	LABOR	TOTAL
(2) Nexel N-3000 205/40/17 (2000 lb max capacity)	160	
Mounted + Balance 4 and Valve Stone		
ALIGNMENT		
2 Wheel		TOTAL
4 Wheel		LABOR
		PARTS
		TIRES
		TAX
		TOTAL

ORIGINAL ESTIMATE \$ _____ DATE _____ TIME _____ BY _____
 REVISED ESTIMATE \$ _____ DATE _____ TIME _____ BY _____
 REVISED ESTIMATE \$ _____ DATE _____ TIME _____ BY _____

I acknowledged notice and oral approval of an increase in the original estimated price
 I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above and beyond the purposes of testing, inspection or delivery at my risk. An express Mechanic's lien is acknowledged on above vehicle to secure payment for the above services. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or other causes.

Consent: I agree that you be type of the consignee/customer filled in forms by customer. There is no limit on the number of copies for the address. Many of our customers and then just charge.

Invoice # _____
 Your Invoice # _____
 Your Invoice Date _____
 Your City, State _____

Page 1 of 3
 Your Ship date _____
 Your File # _____

This is the Customer's Payment Office. You may leave this field or any other fields blank, or fill them in. There is no requirement to use each field. You may use this form as your regular invoice form too.

Transportation Mode: Road Air Sea

Number of Packages: _____
 Gross Weight: _____
 Net Weight: _____

US \$ _____
 19.95
 20.95

Taxes: 1995.00
 3095.00

World Headquarters
 500 Oracle Parkway
 Redwood Shores, CA 94065

Bill To: Ella Fawcett
 8989 N Port
 Milwau

Helen Cole
 Cole D
 Attn:
 203
 Ivy

SPECIAL INSTRUCTIONS

Federal Tax ID: 94-2422637

SoftBalance

Comps/Layout
 Creative Subtotal

Computer Layout
 Computer Typesetting
 Computer Production
 Production Subtotal

Project Administration
 Project Coordination
 Account Service Subtotal

DATE HERE

US \$

4090.00
 10.00
 20.00
 25.00
 50.00
 4195.00

SUB-TOTAL

7.7500% Sales Tax

12 VOLT

FEB 05 (6)

32 2000 140000

106-052000

4-105-336000

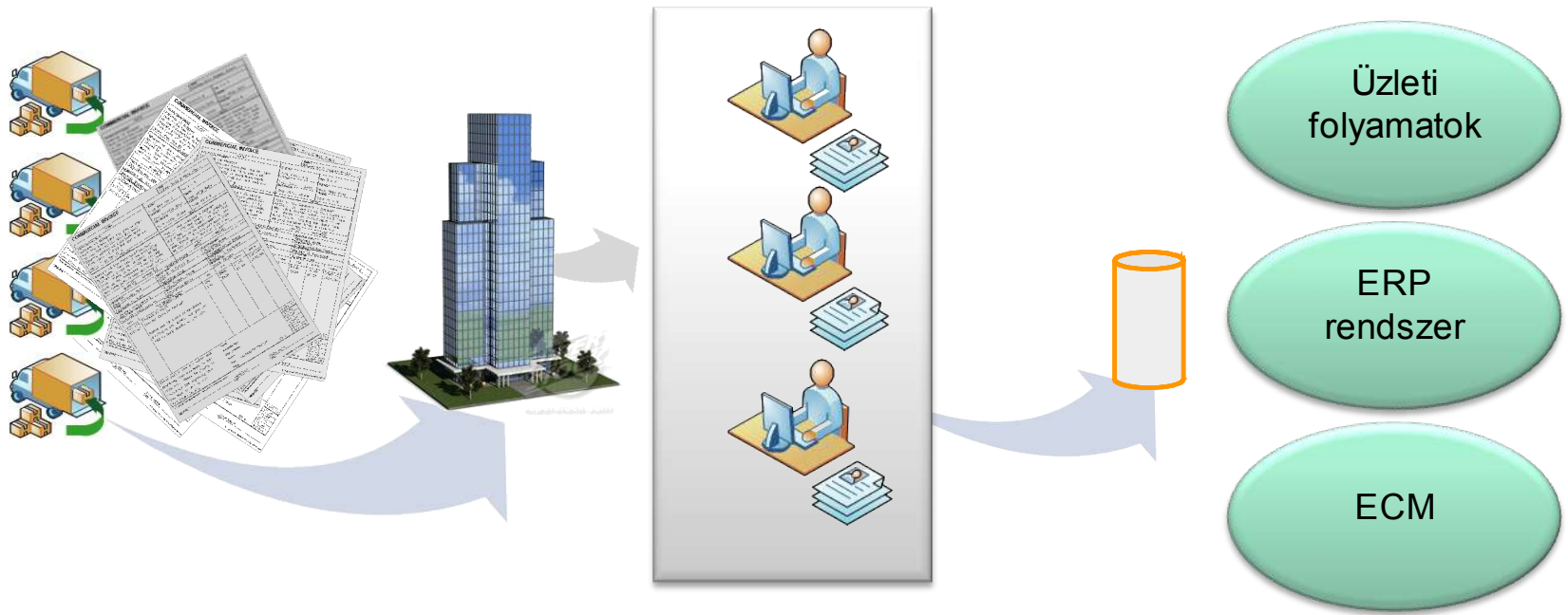
605-17803-N.P

44571

202 010



Manuális számlakezelés



Számlák keletkezése > számlák gyűjtése > számlák feldolgozása

Manuális vs. elektronikus

Fejlettségi osztály meghatározása	Az osztály teljesítő képessége
Elektronikus számlafeldolgozás: Felső 20%	§ ~450,- Ft egy számla feldolgozása § 2.8 nap
Ipari átlag (manuális feldolgozás): Középső 50%	§ ~1.970,- Ft egy számla feldolgozása § 15.8 nap
Belépő szint (fejletlen manuális feldolgozás): Alsó 30%	§ ~7.160,- Ft egy számla feldolgozása § 35.1 nap

Az automatizálás ~6.700,- Ft megtakarítást jelent számlánként

Intelligens számlakezelés

IBM DataCap

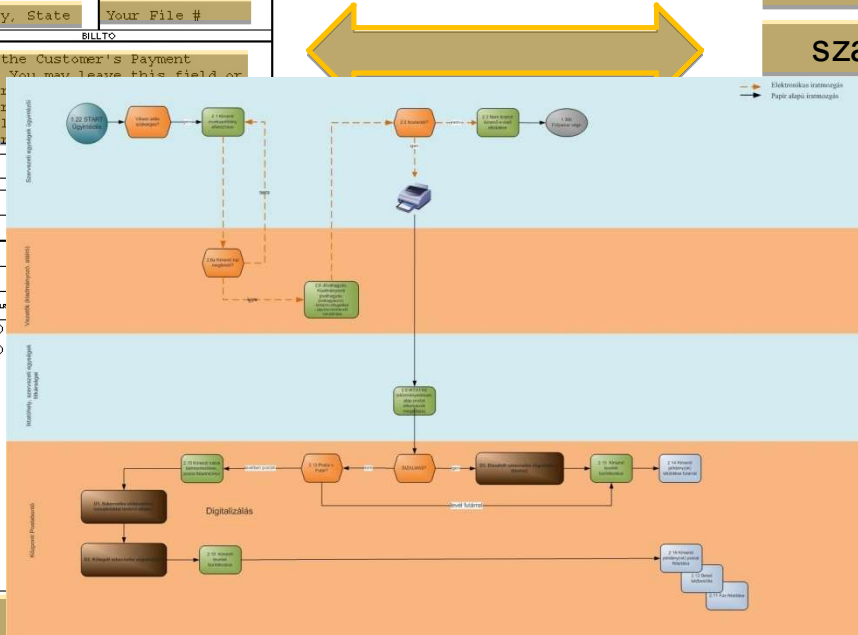
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COMMERCIAL INVOICE

SHIPPER Full Name and Full Address: Address of Shipper Each field has room for you to type in the information that you want. There's plenty of room here with five lines of copy for the address. Tax ID No: Your Tax ID #		#BILL: Airway Bill Number Field Invoice No: Your Invoice # Page 1 of 3 Invoice Date: Your Invoice Date Your Ship date Place of Issuance: Your City, State File Number: Your File #	
CONSIGNEE Address of the Consignee/Customer goes here. You can store partially filled in forms by customer, or by item. There is no limit on storage. Many of our customers store by item and then just change the customer.		BILL TO This is the Customer's Payment Office. You may leave this field or any other in. There is no limit on storage. Many of our customers store by item and then just change the customer.	
RELATED <input checked="" type="checkbox"/> NOT RELATED <input checked="" type="checkbox"/>		SHIPMENT INFORMATION Customer PO No: Your Customer PO# Letter of Credit #: Letter of Credit # PO Date: Customer PO date Currency: Currency Used Ref No: Another Reference # Payment Terms: Your Payment Terms Country of Ultimate Destination: Ultimate Destination Incoterms Field: Incoterms Field	
Item No. 111-111 222-222	Description Name, Type of Good, Brand, Model Country of Origin, Part, Serial No. Example Product Another Example Product	Qty 100 100	There are 13 lines of products available per sheet, and you may add as many sheets as you like.
These fields are for notes and anything else you want to use them for. There is plenty of room here for anything that you want to say or add. Six lines in all.		Subtotal Subtotal Other Pages Shipping & Handling Insurance Other Packaging Charge TOTAL	20.00 25.00 50.00 US \$ 4195.00

I declare all information contained on this invoice to be true and correct.
 _____ President Date Here
 SIGNATURE TITLE DATE



- szállító
- vevő
- számla szám
- számla dátuma
- ...stb
- összesítő összeg
- összesítő összeg
- ÁFA
- végösszeg
- ...stb

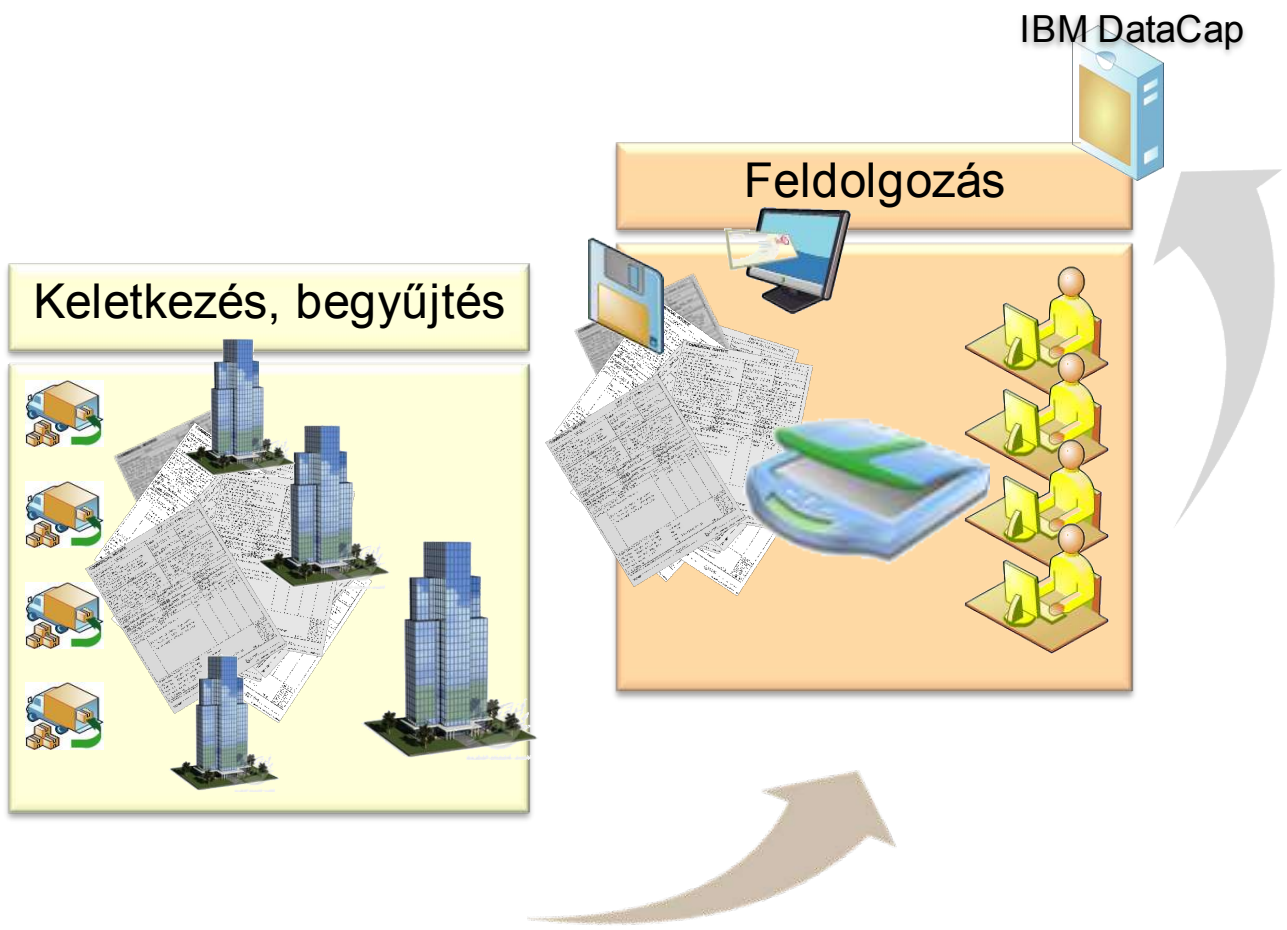
Intelligens számlakezelés

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Intelligens számlakezelés



Datacap Taskmaster Accounts Payable Capture

Verify - Batch Pilot
Document 1 of 5

File Edit View Navigate Help

Page 1 of 1

Lookup Vendor: POLR (3)

Remittance_Zip: Stinger Wellhead Protection Comp

75013-0028

75013-0028

Vendor_Number: TS63689 Invoice_Type: PO

Invoice_Date: 02/15/10 Invoice_Number: 36149 Tax: 107.63

02/15/2010 36149 107.63

Invoice_Total: 2157.63 PO_Number: 013125 Shipping: 0.00

2157.63 013125 0.00

Datacap

Details 1(1)

Lineitem 1(5)

Prev Next < Add Add > Del

PO LineNum	ItemID	Qty
20	1000-NM	1
	1000-NM	1

ItemDesc: 000-NM Base Charge

Base Charge

Price	LineTotal
2100.00	2100.00
2,100.00	2,100.00

Calculate Blank Find Details View Details

Image View

Invoice No. 36149

Stinger Wellhead Protection

PO Box 1639 Phone: (972)727-5902
Allen, TX 75013-0028 Fax: (972)269-8761

INVOICE

Customer: HC Technologies
Address: 4903 Business Parkway
City: Rochester State: MN ZIP: 55901
Phone: (507) 555-1212

Misc: Date: 02/15/10
Order No.: 738939
PO #: 013125
Terms: 2/10Net30

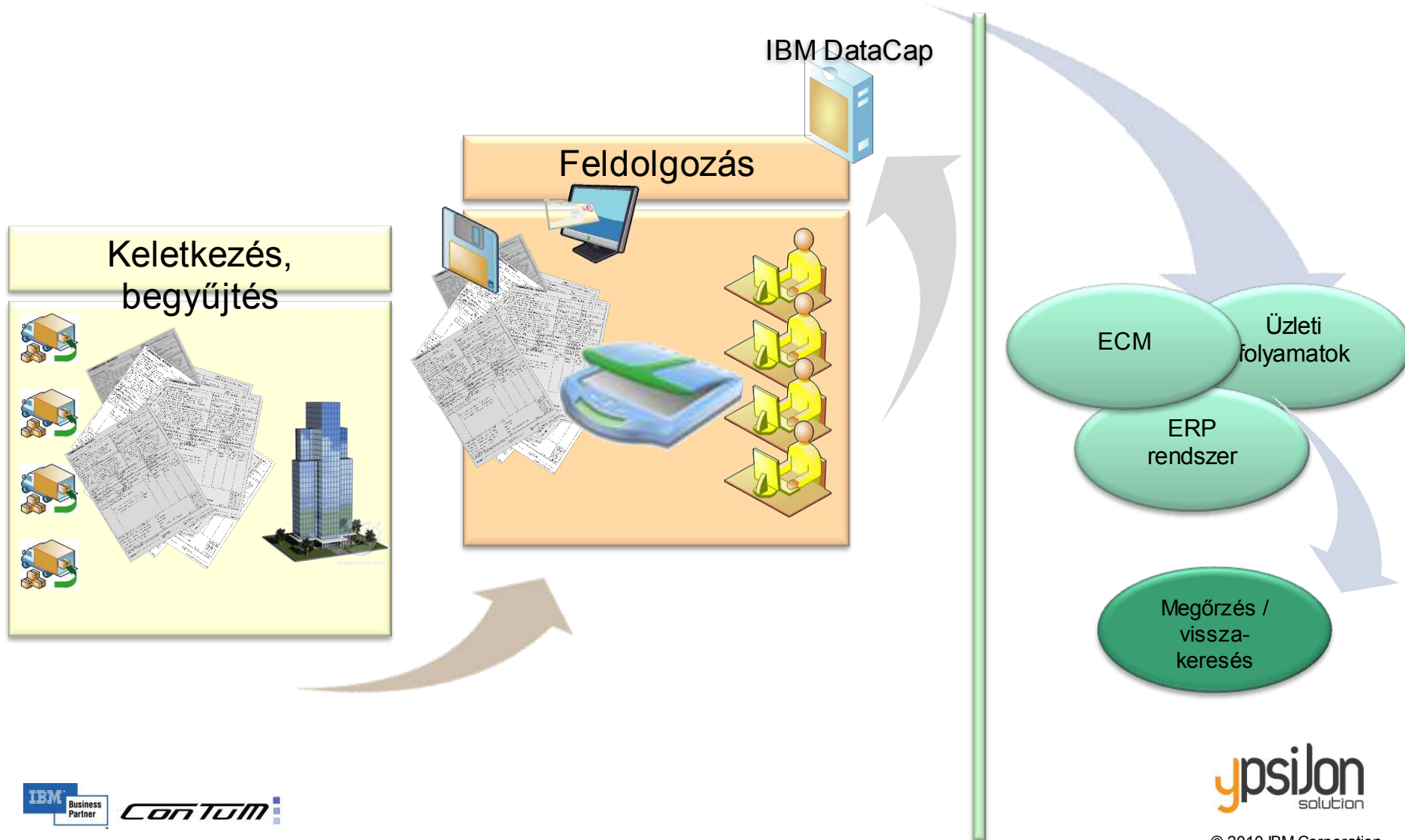
Qty	Item	Description	Unit Price	TOTAL
1	1000-NM	Base Charge	2100.00	2100.00
50	1100-NM	Mileage	3.00	150.00
1	3200-NM	3" Remote Valve	500.00	500.00
1	13001-NM	Additional Man	400.00	400.00
1	Discount	Discount	-1100.00	-1100.00

SubTotal: 2050.00
Shipping: 3.00
Tax 5.25%: 107.63
TOTAL: 2157.63

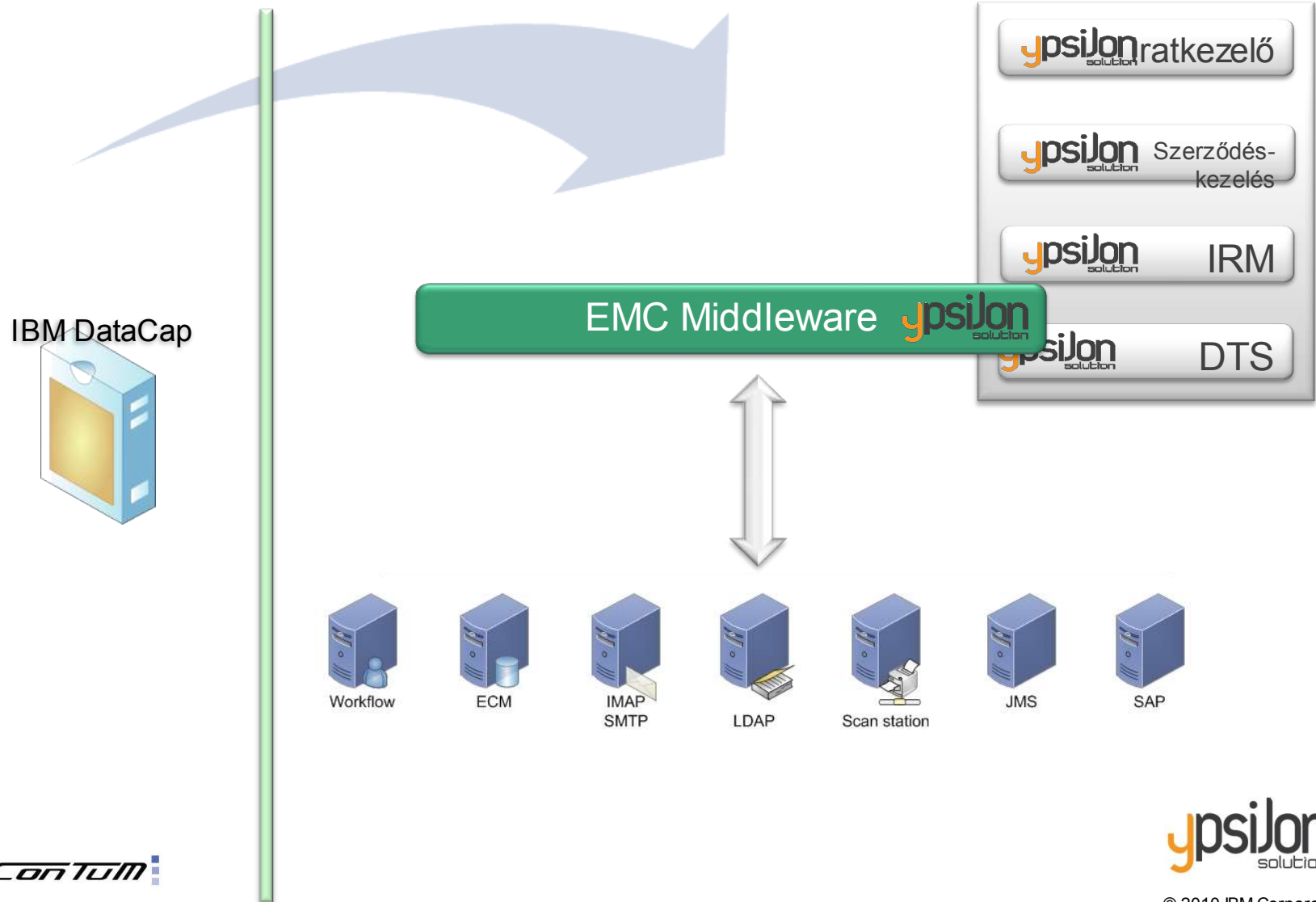
Office Use Only

Task
20100327.001 20100327.001.01 TM000001

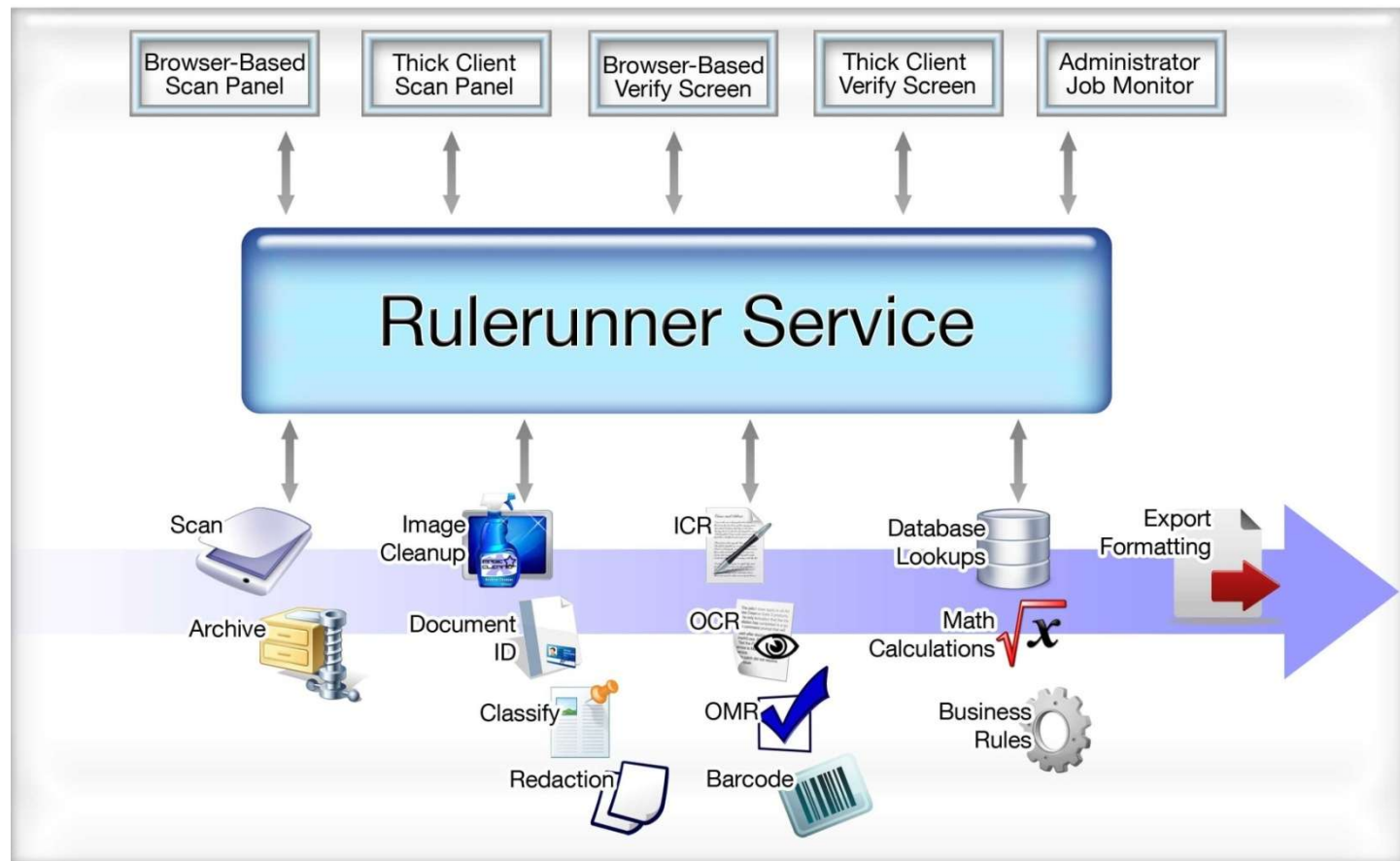
Intelligens számlakezelés



Intelligens számlakezelés



- Accounts Payable
- Healthcare
- Insurance
- Government
- Financial Services
- Transportation
- Manufacturing



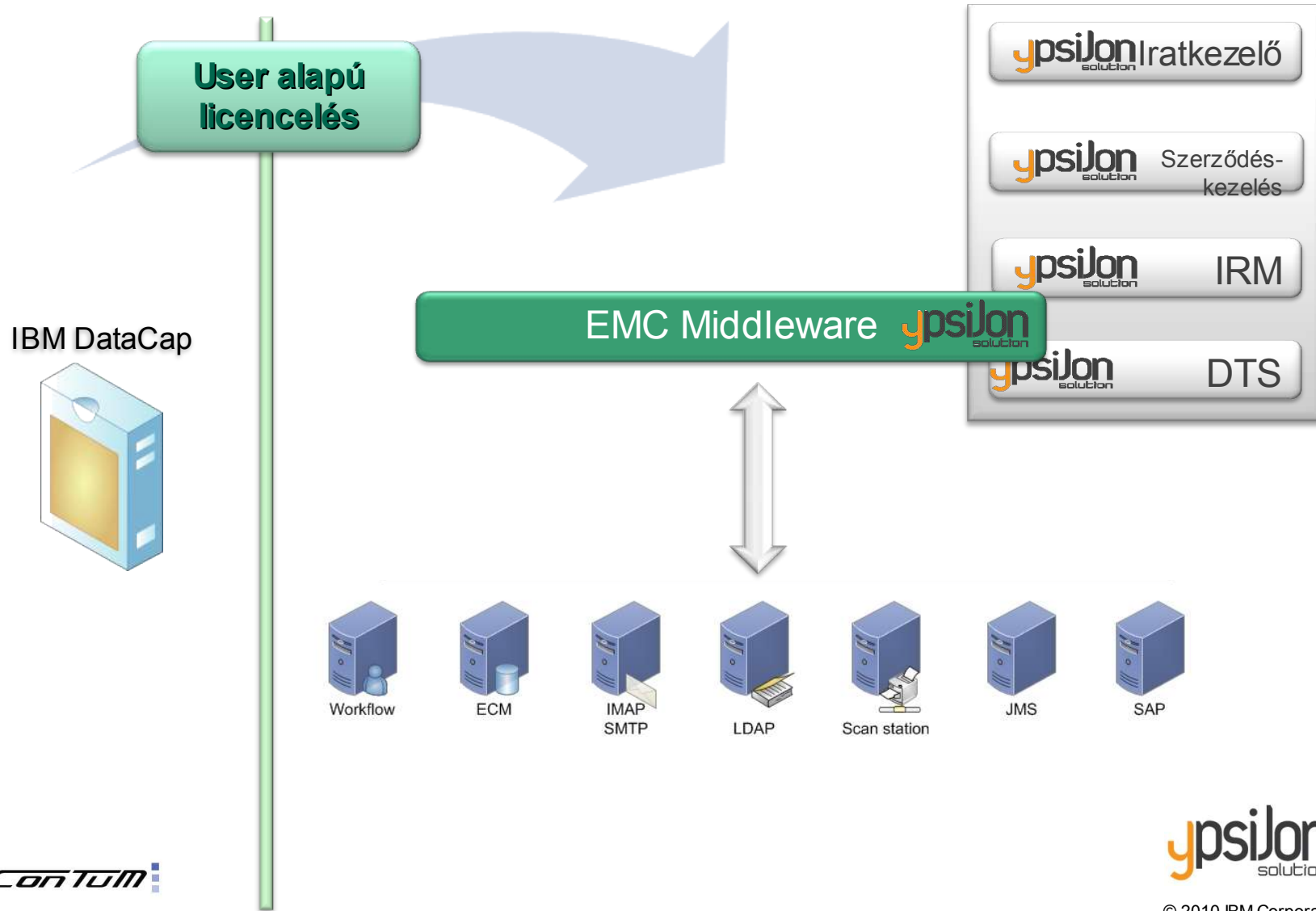
Megtérülés

FELDOLGOZÁSI IDŐ

KÖLTSÉCSÖKKENTÉS

ELLENŐRIZHETŐSÉG

Licenc politika



komplex
munkavégzés
számlaigazolás
vékonykliens
automatizált
szkenelés
optimális
ergonómia
átfutás
YPSILON
gyors
megőrzés
licencelés
KÖLTSEGI
GÉP
CSÖKKENÉS
FOLYAMATOK
megtérülés
SZÁMLÁK
profitálás
FEJLŐDÉS
alapú
felhasználó
HATÉKONY
ROIhawaii

Contum Ypsilon

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