DDD-1590A FORFF (7-12)

## ARIZONA DEPARTMENT OF ECONOMIC SECURITY Division of Developmental Disabilities

## MONTHLY INVOICE COVER SHEET

FROM	FOUR DIGIT ALPHA COI	FOUR DIGIT ALPHA CODE		
CONTACT PERSON	PROVIDER ID NO.	PROVIDER ID NO.		
PHONE NO.	EMAIL ADDRESS	EMAIL ADDRESS		
ADDRESS				
CITY	STATE	ZIP		
MONTH ENDING	TOTAL AMOUNT BILLED	TOTAL AMOUNT BILLED		
I certify that the information contained in the with the terms of the contract.	attached invoice is corn	rect and is prepared in acco	ordance	
PROVIDER SIGNATURE		DATE		

All claims should be submitted to:

Arizona Department of Economic Security
Division of Developmental Disabilities
ATTN: Business Operation Unit – Site 791A
P.O. Box 6123
Phoenix, Arizona 85005-6123

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact the Division of Developmental Disabilities ADA Coordinator at 602-542-0419; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. • Ayuda gratuita con traducciones relacionadas con los servicios del DES está disponible a solicitud del cliente.