

CITY OF OCEAN CITY

861 ASBURY AVENUE
OCEAN CITY, NJ 08226
TEL (609)525-9346 FAX (609)391-1707

S H I P T O	O. C AIRPORT 26th STREET & BAY AVENUE OCEAN CITY, NJ 08226
	V E N D O R


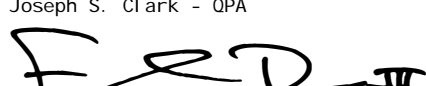
NOTICE: TAX ID #21-6000952 - TAX EXEMPT

PURCHASE ORDER	
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.	
NO.	11-00030

ORDER DATE: 01/19/11
REQUISITION NO: R1100040
DELIVERY DATE:
STATE CONTRACT: Q 06-015
F. O. B. TERMS:

PAYMENT RECORD
CHECK NO.
DATE PAID

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	OCTOBER 2011	1-01-20-650-259	4.7800	4.78
			TOTAL	4.78

CLAIMANT'S CERTIFICATION & DECLARATION	OFFICER'S CERTIFICATION	APPROVAL TO PURCHASE
<p>I do solemnly declare and certify under penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.</p> <p>X</p> <p>VENDOR SIGN HERE</p> <p>OFFICIAL POSITION DATE</p> <p>TAX ID NO. OR SOCIAL SECURITY NO.</p>	<p>I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.</p> <p>DEPT. HEAD DATE</p> <p>VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:</p> <p>CITY OF OCEAN CITY 861 ASBURY AVENUE OCEAN CITY, NJ 08226</p>	<p>DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.</p> <p></p> <p>Joseph S. Clark - QPA</p> <p></p> <p>Frank Donato III - CFO# N-0651</p>