

VENDOR NO.  
384594

**BILL TO**

**BOARD OF EDUCATION  
TOWNSHIP OF UNION  
COUNTY OF UNION  
2369 MORRIS AVENUE • P.O. BOX 3139  
UNION, NEW JERSEY 07083-1939  
(908) 851-6408, 6409 or 6410 • FAX (908) 964-1462**

BUDGET YEAR  
2011->2012

<b>PURCHASE ORDER NUMBER</b>
12-01932
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

DATE:  
10/28/2011

VENDOR:  
EMER PHY ASSOC NO AMERICA, P.C  
P.O. BOX 635551  
CINCINNATI, OH 45263

SHIP TO:  
Attn To : James J. Damato, Bd. Sec.  
BUSINESS OFFICE  
2369 MORRIS AVENUE  
UNION,, NJ 07083

P.O. TYPE	MISC. DESCRIPTION	Partial	Comple	
Po_type= Other	payment of med. bill balance	<input type="checkbox"/>	<input type="checkbox"/>	
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	Payment of balance due to Emergency Physician Associates of No. Jersey for emergency room treatment for Gabrielle Cooley, student at Burnet Middle School who was injured on June 3, 2011 - see student accident report attached.  BOE APPROVAL 11/15/11	276.00	276.00
				276.00
	7253/11-000-230-820-01-54-	(\$276.00)		

**INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)**

**VERBAL ORDERS ARE PROHIBITED.**

- Invoices must be rendered on the enclosed voucher form.
- Make a separate invoice for each order.
- Do not make any shipments "Collect". Prepay transportation charges, and include amount on bill, unless otherwise agreed.
- Enclose shipping memo with each shipment.
- The right is reserved to cancel this order if reasonable shipment cannot be made.
- The purchase is exempt by statute from payment of all Federal, State and Municipal excise, sales and other taxes.
- All hazardous Chemical Products must be accompanied by material safety data sheets and labeled with CAS numbers.

**ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY**

BUSINESS ADMINISTRATOR/BOARD SECRETARY	DATE
<b>VENDOR ACCEPTANCE CERTIFIES COMPLIANCE WITH FEDERAL AND STATE REGULATIONS REGARDING EQUAL EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, CREED, COLOR, NATIONAL ORIGIN, ANCESTRY, AGE, SEX, AFFECTIONAL OR SEXUAL ORIENTATION, MARITAL STATUS, FAMILIAL STATUS, LIABILITY FOR SERVICE IN THE ARMED FORCES OF THE UNITED STATES, ATYPICAL HEREDITARY CELLULAR OR BLOOD TRANSFUSION, OR DISABILITY.</b>	

VENDOR NO.  
268300

**BILL TO**

**BOARD OF EDUCATION  
TOWNSHIP OF UNION  
COUNTY OF UNION  
2369 MORRIS AVENUE • P.O. BOX 3139  
UNION, NEW JERSEY 07083-1939  
(908) 851-6408, 6409 or 6410 • FAX (908) 964-1462**

BUDGET YEAR  
2011->2012

PURCHASE ORDER NUMBER	
12-01824	
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.	

DATE:  
10/20/2011

VENDOR:  
OVERLOOK HOSPITAL  
99 BEAUVOIR AVE AT  
SYLVAN RD  
SUMMIT,, NJ 07901-0220

SHIP TO:  
Attn To : James J. Damato, Bd.  
Sec.  
BUSINESS OFFICE  
2369 MORRIS AVENUE  
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= Other		payment of balance due for ER		
		Partial <input type="checkbox"/> Complete <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	Payment of balance due to Overlook Hospital for emergency room treatment for Gabrielle Cooley student at Burnet Middle School who was injured on June 3, 2011 - see student accident report attached.  BOE APPROVAL - 11/15/11	55.00	55.00
7253/	11-000-230-82	0-01-54- (\$55.00)		\$55.00

**INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)**

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- Invoices must be rendered on the enclosed voucher form.
- Make a separate invoice for each order.
- Do not make any shipments "Collect". Prepay transportation charges, and include amount on bill, unless otherwise agreed.
- Enclose shipping memo with each shipment.
- The right is reserved to cancel this order if reasonable shipment cannot be made.
- The purchase is exempt by statute from payment of all Federal, State and Municipal excise, sales and other taxes.
- All hazardous Chemical Products must be accompanied by material safety data sheets and labeled with CAS numbers.

**ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY**

BUSINESS ADMINISTRATOR/BOARD SECRETARY	DATE
<b>VENDOR ACCEPTANCE CERTIFIES COMPLIANCE WITH FEDERAL AND STATE REGULATIONS REGARDING EQUAL EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, CREED, COLOR, NATIONAL ORIGIN, ANCESTRY, AGE, SEX, AFFECTIONAL OR SEXUAL ORIENTATION, MARITAL STATUS, FAMILIAL STATUS, LIABILITY FOR SERVICE IN THE ARMED FORCES OF THE UNITED STATES, ATYPICAL HEREDITARY CELLULAR OR BLOOD TRAIT OF ANY INDIVIDUAL OR NON-APPLICABLE DISABILITY.</b>	

VENDOR NO.  
386302

BILL TO

**BOARD OF EDUCATION  
TOWNSHIP OF UNION  
COUNTY OF UNION**  
2369 MORRIS AVENUE • P.O. BOX 3139  
UNION, NEW JERSEY 07083-1939  
(908) 851-6408, 6409 or 6410 • FAX (908) 964-1462

BUDGET YEAR  
2011->2012

PURCHASE ORDER NUMBER	
12-01937	
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.	

DATE:  
10/28/2011

VENDOR:  
F

UNION IMAGING ASSOCIATES PA  
445 CHESTNUT ST.  
UNION, NJ 07083

SHIP TO:  
T F

Attn To : JAMES J. DAMATO, BD.  
SEC.  
BUSINESS OFFICE  
2369 MORRIS AVENUE  
UNION,, NJ 07083

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P.O. TYPE		MISC. DESCRIPTION		
Po_type= Other		payment of medical bill		
		Partial <input type="checkbox"/> Complete <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	Payment of medical bill for treatment of injuries sustained by Barbara Ann Zehner, a visitor at Livingston Elementary School, on 2/10/11 in accordance with accident report attached.  BOE APPROVAL: 11/15/11	117.81	117.81
7253/	11-000-230-820	01-54- (\$117.81)		\$117.81

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- The right is reserved to cancel this order if reasonable shipment cannot be made.
- The purchase is exempt by statute from payment of all Federal, State and Municipal excise, sales and other taxes.
- All hazardous Chemical Products must be accompanied by material safety data sheets and labeled with CAS numbers.

**ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY**

\_\_\_\_\_  
BUSINESS ADMINISTRATOR/BOARD SECRETARY

\_\_\_\_\_  
DATE

**VENDOR ACCEPTANCE CERTIFIES COMPLIANCE WITH FEDERAL AND STATE REGULATIONS REGARDING EQUAL EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, CREED, COLOR, NATIONAL ORIGIN, ANCESTRY, AGE, SEX, AFFECTIONAL OR SEXUAL ORIENTATION, MARITAL STATUS, FAMILIAL STATUS, LIABILITY FOR SERVICE IN THE ARMED FORCES OF THE UNITED STATES, ATYPICAL HEREDITARY CELLULAR OR BLOOD TRAIT OF ANY INDIVIDUAL OR NON-APPLICABLE DISABILITY.**