

VENDOR NO.
3000

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

2013->2014

PURCHASE ORDER NUMBER
14-03415
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE

DATE:
03/07/2014

VENDOR:

SHIP TO:

SCHOOL SPECIALTY, INC.
ORDER ENTRY DEPT
P.O. BOX 1579
APPLETON, WI 54912-1579

CENTRAL FIVE JEFFERSON SCHOOL
155 HILTON AVENUE
VAUXHALL,, NJ 07088


P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
				Partial <input type="checkbox"/> Complete <input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	OFFICE SUPPLIES ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	48527 LASER JET PRINTER 19PPM 150HT. CAP 13X19	277.32	277.32
1	Each	1409788 SHREDDER 16 SHEET CROSSCUT	554.66	554.66
35	Each	1292956 STORAGE CLEAR PLASTIC BOX W/ LID	7.88	275.80
1	Each	1110236 STORAGE BOX 4X6	21.00	21.00
1	Each	1073857 TISSUE KLNX 12 BX 125 SHEETS	33.94	33.94
5	Each	1088389 NOTEBOOK QUICKKNTS 20# BK	9.59	47.95
2	Each	1111142 VERTICAL STEEL ORGANIZERS MESH	47.46	94.92
				\$1,305.59
CONTRACT# 80986				
7294/11-000-240-610-01-06- (\$1,305.59)				
BOE 4/29/14				

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

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

VENDOR NO.
3000

BILL TO

**BOARD OF EDUCATION
TOWNSHIP OF UNION
COUNTY OF UNION**
2369 MORRIS AVENUE • P.O. BOX 3139
UNION, NEW JERSEY 07083-1939
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BUDGET YEAR
2013->2014

PURCHASE ORDER NUMBER
14-03415
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

**VOUCHER
PLEASE SIGN & RETURN**

DATE:
03/07/2014

The regular meeting of the Board is generally held on the Third Tuesday of the month. To be approved for payment, bills must be presented at least 30 days prior to the regular meeting.

VENDOR:

SHIP TO:

SCHOOL SPECIALTY, INC.
ORDER ENTRY DEPT
P.O. BOX 1579
APPLETON, WI 54912-1579

CENTRAL FIVE JEFFERSON SCHOOL
155 HILTON AVENUE
VAUXHALL,, NJ 07088

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
		Partial <input type="checkbox"/> Complete <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
OFFICE SUPPLIES				
1	Each	48527 LASER JET PRINTER 19PPM 150HT. CAP 13X19	277.32	277.32
1	Each	1409788 SHREDDER 16 SHEET CROSSCUT	554.66	554.66
35	Each	1292956 STORAGE CLEAR PLASTIC BOX W/ LID	7.88	275.80
1	Each	1110236 STORAGE BOX 4X6	21.00	21.00
1	Each	1073857 TISSUE KLNX 12 BX 125 SHEETS	33.94	33.94
5	Each	1088389 NOTEBOOK QUICKKNTS 20# BK	9.59	47.95
2	Each	1111142 VERTICAL STEEL ORGANIZERS MESH	47.46	94.92
				\$1,305.59
CONTRACT# 80986				
7294/11-000-240-610-01-06- (\$1,305.59)				
BOE 4/29/14				

VENDOR'S CERTIFICATION & DECLARATION

declare that the goods or services itemized in this bill have been delivered or rendered; that no bonus has been given or received by any person or persons within the knowledge of this claimant; and that the above bill is true and correct.

Yes No

SIGNATURE & TITLE _____ DATE _____

s Your Company

FEDERAL TAX I.D. NO. or SOCIAL SECURITY NO. _____


PAYMENT RECORD

CHECK NO. _____

DATE PAID _____

APPROVED BUSINESS ADMIN./BOARD SECRETARY _____

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

VENDOR NO.
49500

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
2013->2014

PURCHASE ORDER NUMBER
14-03481
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

DATE:
03/20/2014

VENDOR:
[]

SHIP TO:
[] []

BUY WISE AUTO PARTS
2091 SPRINGFIELD AVENUE
VAUXHALL,, NJ 07088-1220

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
				Partial <input type="checkbox"/> Complete <input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	TRANS/ FLEET ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
20	Each	HEADLIGHT BULBS H6054	8.35	167.00
1	Each	HEAD LAMP KIT 003427811	114.47	114.47
STATE CONTRACT # 73719 B O E APPROVAL DATE 4/29/14				\$281.47
7559/11-000-270-615-01-27- (\$281.47)				

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

[Signature] 3/21/14
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.

Page 1
MGL PRINTING SOLUTIONS U0124

VENDOR NO. 135600

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
2013->2014

PURCHASE ORDER NUMBER
14-03524
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

DATE: 03/27/2014

VENDOR:

SHIP TO:

GRAINGER INDUSTRIAL SUPPLY
GOVERNMENT CALL CENTER
55 JACKSON AVENUE
CRANFORD,, NJ 07016

Attn To : PAUL SCHWAB
OPERATIONS AND MAINTENANCE
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION			Partial	Complete
Po_type= State					<input type="checkbox"/>	<input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT		
2	Each	2VLP3 TOGGLE SWITCH, 3PDT, MAINT ON/OFF/MAINT ON HS W/O 7667	20.97	41.94		
6	Each	1UHZ9 SWVL PLT CSTR W/TOTL-LOK, 300 LB. 3" DIA (DISTRICT)	17.03	102.18		
12	Each	STATE CONTRACT A79875 1PHA1 PLUG IN CFL, 26W, DIMMABLE, 4100K, 17,000 HR	20.57	246.84		
				\$390.96		
TO BE BOARD APPROVED: 4/29/14						
7364/11-000-261-610-04-26-0006 (\$246.84)						
7458/11-000-261-610-01-26- (\$102.18)						
7368/11-000-261-610-04-26-0010 (\$41.94)						

INSTRUCTIONS TO VENDORS

VERBAL ORDERS ARE PROHIBITED.

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ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY

Paul Schwab
BUSINESS ADMINISTRATOR/BOARD SECRETARY

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 TRA OF ANY INDIVIDUAL OR NON-APPLICABLE DISABILITY.

**BOARD OF EDUCATION
TOWNSHIP OF UNION**

BUDGET YEAR

2013->2014

VENDOR NO. 49500

BILL TO

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

PURCHASE ORDER NUMBER

14-03541

THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE

DATE: 03/31/2014

VENDOR:

SHIP TO:

BUY WISE AUTO PARTS
2091 SPRINGFIELD AVENUE
VAUXHALL,, NJ 07088-1220

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				Partial <input type="checkbox"/> Complete <input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	TRANS/MAINT ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	BATTERY CHARGER 24032976	48.78	48.78
1	Each	FLEX PLATE Z166	28.35	28.35
3	Each	RECHARGEABLE BATTERY 24033127	24.59	73.77
2	Each	HEADLAMP KIT 9003144S4BB2	49.99	99.98
2	Each	GASKETS 31398	10.75	21.50
1	Each	TRANS MOUNT EM2816	18.69	18.69
STATE CONTRACT #85992 B O E APPROVAL DATE 4/29/14				\$291.07
7559/11-000-270-615-01-27- (\$291.07)				

INSTRUCTIONS TO VENDORS

ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY

VERBAL ORDERS ARE PROHIBITED.

- Invoices must be rendered on the enclosed voucher form.
- Provide 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.
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- All hazardous Chemical Products must be accompanied by material safety data sheets and labeled with CAS numbers.

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.

VENDOR NO.
49500

B I L L T O

**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
2013->2014

PURCHASE ORDER NUMBER
14-03584
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE

DATE:
04/07/2014

VENDOR:

SHIP TO:

BUY WISE AUTO PARTS
2091 SPRINGFIELD AVENUE
VAUXHALL,, NJ 07088-1220

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
		Partial <input type="checkbox"/> Complete <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
2	Each	LIGHT MODULE 44160	112.67	225.34
3	Each	INTAKE GASKET MS91585	9.12	27.36
2	Each	263350X HOSE	15.62	31.24
1	Each	HOSE 22397M	45.53	45.53
STATE CONTRACT #85992 B O E APPROVAL 4/29/14				\$329.47
7559/11-000-270-615-01-27- (\$329.47)				

INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)

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2. Make a separate invoice for each order.
3. Do not make any shipments "Collect". Prepay transportation charges, and include amount on bill, unless otherwise agreed.
4. Enclose shipping memo with each shipment.
5. The right is reserved to cancel this order if reasonable shipment cannot be made.
6. The purchase is exempt by statute from payment of all Federal, State and Municipal excise, sales and other taxes.
7. 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

[Signature]
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.

VENDOR NO.
382074

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

2013->2014

PURCHASE ORDER NUMBER	
14-03574	
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.	

DATE:
04/07/2014

VENDOR:

SHIP TO:

H.A. DEHART & SON
311 CROWN POINT ROAD
THOROFARE, NJ 08086-9999

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
				Partial <input type="checkbox"/> Complete <input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
2	Each	DE-CCC-55 GALLON DRUM	147.00	294.00
6	Each	TBB 65011984 MUD FLAPS	31.88	191.28
STATE CONTRACT # 73771 B O E APPROVAL DATE 4/29/14				\$485.28
7559/11-000-270-615-01-27- (\$485.28)				

INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)

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7. 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

[Signature]
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.

VENDOR NO.
384271

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**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
2013->2014

PURCHASE ORDER NUMBER
14-03572
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

DATE:
04/07/2014

VENDOR:

SHIP TO:

AIR BRAKE AND EQUIPMENT
225 ROUTE 22 WEST
HILLSIDE, NJ 07205

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
		Partial <input type="checkbox"/> Complet <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
3	Each	109493X AD-IP DESIC CART	104.77	314.31
3	Each	284358N HIGH TEMP GOVERN	41.98	125.94
				\$440.25
STATE CONTRACT # A73722 B O E APPROVAL DATE 4/29/14				
7559/11-000-270-615-01-27- (\$440.25)				

INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)

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 4. Enclose shipping memo with each shipment.
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ORDER INVALID UNLESS SIGNED BY THE BUSINESS ADMINISTRATOR/BOARD SECRETARY

[Signature]
BUSINESS ADMINISTRATOR/BOARD SECRETARY DATE

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VENDOR NO.
49500

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
2013 -> 2014

PURCHASE ORDER NUMBER	
14-03570	
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.	

DATE:
04/07/2014

VENDOR:
r

SHIP TO:
r r

BUY WISE AUTO PARTS
2091 SPRINGFIELD AVENUE
VAUXHALL,, NJ 07088-1220

Attn To : ALDO MARSILLO
TRANSPORTATION
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION			Partial	Comple
Po_type= State					<input type="checkbox"/>	<input type="checkbox"/>
QUANTITY ORDERED	CATALOG / UNIT	TRANS / FLEET ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT		
2	Each	810-011 5/16 NUTS	5.35	10.70		
2	Each	810-012 3/8 NUTS	5.35	10.70		
1	Each	818-011 5/16 LOCK WASHER	5.35	5.35		
1	Each	822-010 1/4 FLAT WASHER	5.35	5.35		
2	Each	822-012 3/8 FLAT WASHER	5.35	10.70		
3	Each	822-014 1/2 FLAT WASHER	6.76	20.28		
2	Each	822-013 7/16 FLAT WASHER	5.94	11.88		
1	Each	822-011 5/16 FLAT WASHER	5.35	5.35		
3	Each	860-007 1/4 BOLT	5.47	16.41		
5	Each	860-110	7.43	37.15		
4	Each	860-320 5/16 BOLT	7.16	28.64		
1	Each	24032976	48.78	48.78		
2	Each	24033127 7/16 BOLT	24.59	49.18		
				\$260.47		
STATE CONTRACT # A85992						
B O E APPROVAL DATE 4/29/14						
7559/11-000-270-615-01-27- (\$260.47)						

INSTRUCTIONS TO VENDORS - (ADDITIONAL INFORMATION ON REVERSE SIDE)

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7. 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

[Signature]
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.

VENDOR NO.
135600

**BOARD OF EDUCATION
TOWNSHIP OF UNION**

BUDGET YEAR

2013->2014

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

BILL TO

PURCHASE ORDER NUMBER	
14-03580	
THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.	

DATE:
04/07/2014

VENDOR:

SHIP TO:

GRAINGER INDUSTRIAL SUPPLY
GOVERNMENT CALL CENTER
55 JACKSON AVENUE
CRANFORD,, NJ 07016

Attn To : PAUL SCHWAB
OPERATIONS AND MAINTENANCE
2369 MORRIS AVENUE
UNION,, NJ 07083

P.O. TYPE		MISC. DESCRIPTION		
Po_type= State				
		Partial <input type="checkbox"/> Complete <input type="checkbox"/>		
QUANTITY ORDERED	CATALOG / UNIT	PLUG IN DIMMABLE ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
24	Each	1PGY6 PLUG INS, CFL, 26W DIMMABLE, 3500K, 17,000 HR	4.77	114.48
				\$114.48
7367/11-000-261-6		DISTRICT STATE CONTRACT A79875 TO BE BOARD APPROVED: 4/29/14 10-04-26-0009 (\$114.48)		

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 _____

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.