ER	UTILITIES AUTHORITY Purchase Requisition	Purchasing Dept. Name
ÆNDOR NO.:	Date: 12/16/10	B Line Originator Authorization
VENDOR NAME: Brenda Kin	- 0	Dollie B. Handin
ADDRESS:	- W - E	Dapt Authorization
ADDRESS:		Finance Authorization - Availability of Funds
ADDRESS:		Finance Admonization - Availability of Funds
ADDRESS:		Purchasing Agent Authorization - Approval to Generate Purchase Order Number after
BRC ON FILE: YESNO	<u> </u>	mandatory requirements are satisfied.
QUOTE ATTACHED: YESNO (For Values of \$1,000.00 or more.)	No:	te: Please allow at least five (5) working days from the date Requisition is received in the Purchasing Department before a Purchase Order Number is issued.
ACCOUNT CODE: 10(0) >10 }	100329	
DATE NEEDED BY:		SHIPPING INSTRUCTIONS
EXPECTED DELIVERY TIME:		ddress:
SPECIAL INSTRUCTIONS: CHECK NE		ddress:
TUEBDAY, 12/21. RESER	VATION WILL CANCEL	

PLAINFIELD MUNICIPAL

APPROVALS:

0	CTI	TURS'D	AY, 12/23,			
ITEM	QTY.	UNIT	ACCOUNT	DESCRIPTION	AMOUNT	
_ 1.	1	EA		Travel Reservations	260.	00
				Re: 74th Annual State Chamber Walk Washington, DC January 26 thru 30, 2011		
				Washington, DC		
				January 26 thry 30, 2011		
				J ' ' '		
				Employee Eric C. Watson		
				Reservation No.: OBF91F		
				AMTRAK NO LONGE ACLEPTS CHECKS		
				ACLEPTS CHECKS		
				TOTAL	260.	00

ANFIELD MUNICIPAL UTILITIES AUTHORITY 127 ROOSEVELT AVENUE • P.O. BOX 5110 PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561 P.K.U.A. 127 ROOSEVELT AVE. PLAINFIELD, NJ 07060 T VENDOR #ERV01 VEN DAVID W. ERVIN DO R

PURCHASE ORD

THIS NUMBER MUST APPE PACKING SLIPS, CORP.

No.

10-01915

ORDER DATE:

12/17/10

REQUISITION NO: DELIVERY DATE: STATE CONTRACT NO:

F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER FROM SIGNS OF N.J. SALES & USE TAX ACT (CHAFTER 31 Law DF 1966)

CHECK NO.

CHECK DATE

QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00 1.00	TRAVEL ALLOWANCE RE: 74TH ANNUAL STATE CHAMBER WALK, WASHINGTON, DC 1/27/2011 THRU 1/30/2011	0-07-10-300-330 0-09-10-300-330	124.2500 124.2500	124.25 124.25
	1/2//2011 TARO 1/30/2011		TOTAL	248.50

			:	

OUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

VENDOR'S CERTIFICAT	ION & DECLARATION	DEPARTMENT C	ENTIFICATION	VENDOR: DO NOT ACCEPT THIS ORDER
If the within bill is correct in its pa	y under the penallies of the law that riculars; that the articles have been	I, having knowledge of the facts supplies have been received o		UNLESS SIGNED BY PURCHASING AGENT
has been given or received by knowledge of this claimant in or	as stated therein; that no bonus any person or persons within the connection with the above claim; that usely due and owing, and that the	certification being based on s reasonable procedures.	igned delivery slips or other	TIEGGIOTTON ALT TOTAL
X ' amount charges a reasonable	A		ء دنيو	Signature Already on File
CLAIMANT	DATE	Signature Alre	ady on File -	PURCHASE ORDER APPROVAL
NOTICE TO VENDOR ORDER NOT VALID WITHOUT AU SHIPPING STATEMENT OR BILL	THORIZED SIGNATURE.	PAYMENTA	PPROVAL	Dolla S. Hambis
SHIPMENT. NO CHARGES OTHER THAN THO ALLOWED WITHOUT APPROVAL	OF THE ISSUING DEPARTMENT.			PURCHASING AGENT SIGNATURE 12/17/2010
. INVOIVE MUST BE FOWARDED T WITH SIGNED VOUCHER.		SIGNATURE	DATE	DAYMENT.
	VOUCHER COPY	- SIGN AT X AND RETUR	N WITH INVOICE FOR	PAYMENT

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

127 ROOSEVELT AVENUE • P.O. BOX 5110 PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 · FAX (908) 226-2561

P.M.U.A. 127 ROOSEVELT AVE. P PLAINFIELD, NJ 07060 T O VENDOR #GEO01 EN GEORGETOWN SUITES 1111 30TH ST, NW WASHINGTON 0 20007 DC

PURCHASE ORDEF

THIS NUMBER MUST APPEAR ON ALL INVOICE PACKING SLIPS, CORRESPONDENCE, ETC.

No.

10-01874

ORDER DATE:

12/09/10

REQUISITION NO: **DELIVERY DATE:**

STATE CONTRACT NO:

F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER PROVISIONS OF N.J. SALES & USE TAX ACT (CHAPTER 30, LAW OF 1966).

CHECK DATE

CHECK DATE				
QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COSIT
1.00	ADMINISTRATION HOTEL ACCOMMODATIONS 1/27/2011 THRU 1/30/2011 RE: 74TH ANNUAL STATE CHAMBER WALK TO WASHINGTON & CONGRESSIONAL DINNER	0-07-10-300-329 0-09-10-300-329	271.5000 271.5000	271.50 271.50
	DAVID W. ERVIN		TOTAL	543.00
			:	

QUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

I do solemnly declare and certify under the penalties of the law that the within bill is correct in 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

VENDOR'S CERTIFICATION & DECLARATION

CLAIMANT DATE

NOTICE TO VENDOR OR CONTRACTOR

- ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.
- NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT. INVOIVE MUST BE FOWARDED TO ORIGINATING DEPARTMENT WITH SIGNED VOUCHER.

DEPARTMENT CERTIFICATION

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.

Signature Already on File

PAYMENT APPROVAL

SIGNATURE DATE

VENDOR: DO NOT ACCEPT THIS ORDER UNLESS SIGNED BY PURCHASING AGENT

REQUISITION APPROVAL

Signature Already on File

PURCHASE ORDER APPROVAL

VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

Georgetown Suites 1111 30th St. NW & 1000 29th St.NW Washington, DC 20007 USA

Phone: 2022987800/2022981600 Fax: 2023335792/2023332019

DateSent: 12/23/2010 **Guest Information** Confirmation# Additional Name(s): David Ervin Home#: Share With Name(s): Office#: Fax#: Mobile#: E-mail Address: Company: Guest Type: CORP VIP Code:

Rate/Stay Summary

Arrive: Thursday, January 27, 2011 Depart: Sunday, January 30, 2011

#Y: 0 #C: 0 #A:]

Building: Georgetown Building

Rm Type: **EXECUTIVE SUITE JACUZZI**

of Rms: Nights:

Date Rate Package Thursday, Jan 27, 2011 \$155.00 \$155.00 Friday, Jan 28, 2011 Saturday, Jan 29, 2011 \$155.00

Total Room:

\$465.00

Total Tax:

\$67.44

Payment/Gtd Summary

Method: **********2668 C/C Account# VISA

Deposit Requested:

0.00

Deposit Due By:

Deposit Received:

\$0.00

Please make all cancellations by 3:00 PM (EST) on the day prior to arrival to avoid a charge of one night room and tax. Group bookings subject to 72 hour cancellation and may be subject to additional penalties.

GRADUATION CANCELLATION POLICY (ARRIVALS MAY 19-21, 2011): Payment for 3 nights room and tax required within 72 hours of booking. \$50.00 cancellation fee for reservations cancelled up to 30 days prior to arrival. Cancellation fee of 3 nights room and tax for reservations cancelled within 30 days of arrival. No refunds for early departures.

PLEASE NOTE BUILDING LOCATION -

GEORGETOWN BUILDING - 1111 30th Street, N.W. - 1000 29th Street, N.W. HARBOUR BUILDING

Check-In Time: 3:00 pm.

Check-Out Time: 12:00 p.m.

FOLLOW US ON TWITTER: GTOWNSUITES BECOME OUR FAN ON FACEBOOK

PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561 P.M.U.A. 127 ROOSEVELT AVE. PLAINFIELD, NJ 07060 VENDOR #WAT01 ERIC C. WATSON E D 0 R

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY 127 ROOSEVELT AVENUE • P.O. BOX 5110

PURCHASE ORDER

PACKING SLIPS, CORRESPOND

No.

10-01914

ORDER DATE:

12/17/10

REQUISITION NO: DELIVERY DATE:

STATE CONTRACT NO:

F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER PRO SECOND TO N.J. SALES & USE TAX ACT (CHAPTER 30, Law 15

CHECK NO.

CHECK DATE

QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00 1.00	TRAVEL ALLOWANCE RE: 74TH ANNUAL STATE CHAMBER WALK, WASHINGTON, DC	0-07-10-300-330 0-09-10-300-330	124.2500 124.2500	124.25 124.25
	1/27/2011 THRU 1/30/2011			
			TOTAL	248.50
	· · · · · · · · · · · · · · · · · · ·	. •		4
				=

OUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

I do solemnly declare and certify under the penalties of the law that the within bill is correct in its particulars; that the articles have been furnished on services rendered as stated therein; that no bonus had 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

NOTICE TO VENDOR OR CONTRACTOR ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE. : SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY

: NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT. INVOIVE MUST BE FOWARDED TO ORIGINATING DEPARTMENT

VENDOR'S CERTIFICATION & DECLARATION

WITH SIGNED VOUCHER.

DATE

DEPARTMENT CERTIFICATION

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.

REQUISITION APPROVAL

VENDOR: DO NOT ACCEPT THIS ORDER

UNLESS SIGNED BY PURCHASING AGENT

Signature Already on File

PAYMENT APPROVAL

Signature Already on File

PURCHASE ORDER APPROVAL

SIGNATURE

VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

127 ROOSEVELT AVENUE • P.O. BOX 5110 PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561

Dα	
ry	-

P.M.U.A. 127 ROOSEVELT AVE. 'PLAINFIELD, NJ 07060 T O VENDOR #GEO01 V GEORGETOWN SUITES E ND 1111 30TH ST, NW WASHINGTON 0 20007 DC

HIS NUMBER MUST APPEAR ON ALL INVOICE PACKING SLIPS, CORRESPONDENCE, ETC.

No.

10-01873

ORDER DATE:

12/09/10

REQUISITION NO: DELIVERY DATE: STATE CONTRACT NO:

F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER PROVISIONS OF N.J. SALES & USE TAX ACT (CHAPTER 30, LAW OF 1966).

CHECK NO.

			CHECK DATE	12/10
QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	ADMINISTRATION HOTEL ACCOMMODATIONS 1/27/2011 THRU 1/30/2011 RE: 74TH ANNUAL STATE CHAMBER WALK TO WASHINGTON & CONGRESSIONAL DINNER ERIC C. WATSON	0-07-10-300-329 0-09-10-300-329	271.5000 271.5000	271.50 271.50
			TOTAL	543.00

OUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

VENDOR'S CERTIFICATION & DECLARATION DEPARTMENT CERTIFICATION **VENDOR: DO NOT ACCEPT THIS ORDER** I do solemnly declare and certily under the penalties of the law that I, having knowledge of the facts; certify that the materials and UNLESS SIGNED BY PURCHASING AGENT the within bill is correct in its particulars; that the articles have been supplies have been received or the services rendered; said furnished or services rendered as stated therein; that no bonus certification being based on signed delivery slips or other REQUISITION APPROVAL has been given or received by any person or persons within the reasonable procedures. 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 Signature Already on File Signature Already on File PURCHASE ORDER APPROVAL DATE CLAIMANT NOTICE TO VENDOR OR CONTRACTOR PAYMENT APPROVAL ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT. INVOIVE MUST BE FOWARDED TO ORIGINATING DEPARTMENT SIGNATURE WITH SIGNED VOUCHER.

VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

Georgetown Suites

1111 30th St. NW & 1000 29th St.NW

Washington, DC 20007 USA

Phone: 2022987800/2022981600 Fax: 2023335792/2023332019

Guest Information

DateSent: 12/23/2010

Confirmation#

Share With Name(s):

R1A849

Additional Name(s):

Eric Watson

Home#:

908 226 2518

Office#: Fax#:

Plainfileld, NJ 07060

Mobile#:

Company:

E-mail Address:

UNI

VIP Code:

Rate/Stay Summary

Arrive:

Thursday, January 27, 2011

Depart:

Sunday, January 30, 2011

#A:]

#Y: 0 #C: 0

Building:

Georgetown Building

Rm Type:

LUXURY EXECUTIVE

of Rms:

Nights:

Date Rate Package Thursday, Jan 27, 2011 \$175.00

Friday, Jan 28, 2011 Saturday, Jan 29, 2011 \$175.00

\$175.00

Guest Type:

Total Room:

\$525.00

Total Tax:

\$76.14

Payment/Gtd Summary

Method:

VISA

C/C Account#

*********2668

Deposit Requested:

0.00

Deposit Due By:

Deposit Received:

\$0.00

Please make all cancellations by 3:00 PM (EST) on the day prior to arrival to avoid a charge of one night room and tax. Group bookings subject to 72 hour cancellation and may be subject to additional penalties.

GRADUATION CANCELLATION POLICY (ARRIVALS MAY 19-21, 2011): Payment for 3 nights room and tax required within 72 hours of booking. \$50.00 cancellation fee for reservations cancelled up to 30 days prior to arrival. Cancellation fee of 3 nights room and tax for reservations cancelled within 30 days of arrival. No refunds for early departures.

PLEASE NOTE BUILDING LOCATION -

GEORGETOWN BUILDING - 1111 30th Street, N.W. HARBOUR BUILDING

- 1000 29th Street, N.W.

Check-In Time: 3:00 pm.

Check-Out Time: 12:00 p.m.

FOLLOW US ON TWITTER: GTOWNSUITES

BECOME OUR FAN ON FACEBOOK