

LAINFIELD MUNICIPAL UTILITIES AUTHORITY • PLAINFIELD, N.J. 07061-5110

No.

021494

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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. PLAINFIELD, NJ 07060 VENDOR #: WAS2011 WASTE EXPO 2011 REGISTRATION P.O. BOX 624 O R IL 60513-0624 BROOKFIELD USA

Purchase order

PACKING SLIPS, CORRESPONDENCE, ETC

No.

11-00637

ORDER DATE:

05/03/11

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

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| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
| 1.00 | CONFERENCE REGISTRATION FEE | 1-09-10-300-328 | 910.0000 | 910.00 |
| | 2011 WASTE EXPO 5/9/11 THRU 5/11/11 | | · | e e e e e e e e e e e e e e e e e e e |
| | EMPLOYEE: TRACEE JOSEPH | | | is charge agrees agrees maken elected bestern |
| | | | TOTAL | 910.00 |
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/OUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

VENDOR'S CERTIFICATION & DECLARATION

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.

NOTICE TO VENDOR OR CONTRACTOR

- 1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE.
- 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT
- 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.
- 4. 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

PAYMENT APPROVAL

VENDOR: DO NOT ACCEPT/THIS ORDER UNLESS SIGNED BY FURCHASING AGEN

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

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

USA

QUANTITY/UNIT

1.00

PLAINFIELD MUNICIPAL UTILATIES AUTHORITY

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

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P.M.U.A.
127 ROOSEVELT AVE.

PLAINFIELD, NJ 07060

VENDOR #:
WAS 2011

WAS TE EXPO 2011 REGISTRATION
P.O. BOX 624
BROOKFIELD

IL 60513-0624

DESCRIPTION

CONFERENCE REGISTRATION FEE

2011 WASTE EXPO

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11-00637

ORDER DATE:

REQUISITION NO:

05/03/11

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

| ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|-----------------|------------|------------|
| 1-09-10-300-328 | 910,0000 | 910.00 |
| | | |
| | | |

5/9/11 THRU 5/11/11

EMPLOYEE: TRACEE JOSEPH

TOTAL 910.00

RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

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DATE RECEIVED Partial Complete

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

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

PURCHASING AGENT SIGNATURE

RECEIPT VERIFICATION COPY

| REQUISITION | |
|-------------|--|
| NUMBER | |

PLAINFIELD MUNICIPAL **UTILITIES AUTHORITY**

APPROVALS:

Administration

Durchase Pequicition

| e e e e e e e e e e e e e e e e e e e | Fulchase nequisition | Dept. Name |
|--------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| VENDOR NO.: | Date: | DAMHIS |
| VENDOR NAME: Waste Expo 20 | 111 Pregistration | Originate Authorization |
| ADDRESS: P.O. Box 624 | V | Dept. Authorization |
| ADDRESS: Brookfield, 1L | | MA |
| ADDRESS: | | Finance Authorization - Availability of Funds |
| ADDRESS: | · | Purchasing Agent Authorization - Approval to |
| zip: 60513 | engang dia pandahan sa tanggan mahalan sa | Generate Purchase Order Number after |
| BRC ON FILE: YESNO | | mandatory requirements are satisfied. |
| QUOTE ATTACHED: YESNO (For Values of \$1,000.00 or more.) | | Note: Please allow at least tive (5) working days from the date Requisition is received in the Purchasing Department before a |
| ACCOUNT CODE: <u> </u> | -300-32d | Purchase Order Number is issued. |
| | | SHIPPING INSTRUCTIONS |
| DATE NEEDED BY: | | Name: |
| EXPECTED DELIVERY TIME: | | Address: |
| SPECIAL INSTRUCTIONS: | | Address: |
| | | |

| ITEM QTY. UNIT | ACCOUNT | DESCRIPTION | AMOUNT | |
|----------------|---------|------------------------------------------|--------|----|
| | | Dallas TX 2011 Waste Expo | 910 | oc |
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| | | TOTAL EMERGENCY PURCHASES NJSA 40A: 11-6 | 910 | 00 |

Receipt of Payment

- Save the Date -

Las Vegas Convention Center

Las Vegas, NV

Educational Conference Sessions: April 30 - May 2, 2012 Exhibit Hall: May 1 - 3, 2012

09-may-2011

REG#: 311289

TRACEE JOSEPH

ADMINISTRATIVE ASSISTANT

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

127 ROOSEVELT AVENUE

PLAINFIELD NJ 07062

Waste Expo 2011 May 10 - 12, 2011 Dallas Convention Center Dallas, TX

| ate | Qty | Description | Fee | Total |
|-----------------|-----|------------------------------------------|--------|---------|
| | | | | |
| 5/09/11 00:00 | 1 | FULL EVENT-NON MEMBER | 910.00 | 910.00 |
| 1/01/09 00:00am | 1 | WORKSHOP/Workshop Package | 0.00 | 0.00 |
| 5/09/11 09:00am | 1 | Wla/Workshop Monday Landfill Workshop-Ac | 0.00 | 0.00 |
| 5/09/11 12:00pm | 1 | Lla/Monday Lunch and Learn: From Company | 0.00 | 0.00 |
| 5/09/11 12:00pm | 1 | L4A/Monday Landfill Workshop Lunch-Accep | 0.00 | 0.00 |
| 5/09/11 06:30pm | 1 | WRA/Welcome Reception-Accepted | 0.00 | 0.00 |
| 5/10/11 10:30am | 1 | W2A/WKS Tuesday Fleet Management Worksho | 0.00 | 0.00 |
| 5/10/11 12:00pm | 1 | L2A/Tuesday Lunch-n-Learn: Extended Prod | 0.00 | 0.00 |
| 5/10/11 12:00pm | 1 | L5A/Tuesday Workshop Fleet Management Wo | 0.00 | 0.00 |
| 5/11/11 12:00pm | 1 | L3A/Wednesday Lunch-n-Learn: The Gulf Co | 0.00 | 0.00 |
| 5/09/11 00:00 | | CHECK PAYMENT | | -910.00 |
| | | | | + 1 |
| | | Total Due | | 910.00 |
| | | Total Credits | | -910.00 |
| | | Balance Due | | 0.00 |

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| | | Seven Hundred Fifty AND 00/100 bollars |
| \$*******750.00 | 21593 | 05/20/11 |
| AMOUNT | GHECKNO. | GENERAL ACCOUNT DATE |
| No. 021 | BankofAmerica PLANFIELD N.J. 02063 | BAINHELD MUNICIPAL BHIFFHES AUTHORITY 1 127-ROOSEVELLAVENUEPO-BOX-5110 |

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

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

Pq.

P.M.U.A.
127 ROOSEVELT AVE.

PLAINFIELD, NJ 07060

VENDOR #:
ADRO1

ADRIAN'S CATERERS
P.O. BOX 2845
PLAINFIELD NJ 07060

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11~00260

ORDER DATE:

03/01/11

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

| | | | CHECK DATE | ~ /1) |
|---------------|-------------------------------------------|------------------------------------|----------------------|------------------|
| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
| 1.00 1.00 | CATERING SERVICE FEBRUARY & MARCH 2011 | 1-07-05-300-305 1-09-05-300-305 | 375.0000 375.0000 | 375.00 375.00 |
| | | | TOTAL | 750.00 |
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RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

I HEREBY DEPTIFY THAT THE ARTICLES ABOVE SPECIFIED HAVE BEEN RECEIVED OR THE SERVICES PERFORMED, THAT THE QUANTITY NOTED IS CORRECT, AND THE GOALITY IS AS SPECIFIED, EXCEPT AS NOTED.

RECEIVED BY FULL SIGNATURE

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D Chmbloth

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

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

PURCHASING AGENT SIGNATURE

5/14/2011

RECEIPT VERIFICATION COPY

and View

ADRIAN'S CATERERS

PO BOX 2845 1300-08 EAST 2110 STREET

PLAINFIELD, NJ 07062

(908) 754-8532

DATE 2/5/1/

| ORGANIZATION: PAUL PRANQUET INVOICE |
|--------------------------------------------------------|
| CUSTOMER |
| ADDRESS: 127 Proposerelt Ave CITY/STATE Plaintich D |
| CITY/STATE Plaintich DJ |
| PHONE |
| ROOM:GUARANTEED # OF PEOPLE: |
| p # 11-00410 00260 |
| FOOD: BUSINESS MTD. 1375.50 |
| - 010.00 |
| |
| EQUIPMENT RENTAL: |
| SERVICE CHARGE: |
| TAX: |
| MISCELLANEOUS: |
| |
| SUB TOTAL: \$ 375.60 |
| ADVANCE DEPOSIT: |
| TOTAL: \$375.60 |
| SIGNATURE: FILES: |

Pastchee

ADRIAN'S CATERERS

PO BOX 2845 1100-08 EAST 2100 STREET

PLAINFIELD, NJ 07062

(908) 754-8532

DATE: 3/9/1/

BANQUET INVOICE ORGANIZATION: CUSTOMER: PHONE: GUARANTEED # OF PEOPLE: ROOM: EQUIPMENT RENTAL: SERVICE CHARGE: TAX: _ MISCELLANEOUS: SUB TOTAL # 375 06 ADVANCE DEPOSIT: TOTAL: \$ 375-00



FILES:

SIGNATURE:

| OLICINFIELD ON DEFENDANCE OF THE PROPERTY OF T | PLAINFIELD MUNICIPAL UTILITIES AUTHORITY 127 ROOSEVELT AVENUE • P.O. BOX 517 PLAINFIELD, N.J. 07061-5110 |
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| 127 ROOSEVELT AVENUE • P.O. BOX 5110 PLAINFIELD, N.J. 07061-5110 |
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PLAINFIELD MUNICIPAL UTILITIES AUTHORITY • PLAINFIELD, N.J. 07061-5110 endor: ADRO1 ADRIAN'S CATERERS
PO: 11-00419 DESC: CATERING SERVICES
INV: APRIL 2011 REFERENCEDESCRIPTION Sheck Date: 05/11/11 | Check Amount: \$*******375.00 No. NETAMOUNT 021520 375.00

| 10 THE ORDER OF | | | |
|------------------------------------------------------------|-----------------------------------------------|------------------------------------------------|-----------------------------------------|
| ADR P.O PLA | e Hund | GENE GENE | (18) (18) |
| ADRIAN'S CATE P.O. BOX 2845 PLAINFIELD, N | red sev | DENERAL ACCOUNT | anana Oberanda |
| ADRIAN'S CATERERS P.O. BOX 2845 PLAINFIELD; NJ 07060 | enty F | PLAINFIEED; N.3; 07061-8410 GENERAL ACCOUNT | HERAKE |
| 7060 | ive AND | d | karnoharksshalura Ivalokakacemaniyar |
| | Three Hundred Seventy Five AND 00/100 Dollars | DATE: | |
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| 2 SIGNATURES REQUIRED IF OVER \$2000.00 | 5. θθ | INFOMV | |
| 3\$2000.00 | | | 021520 |
| GNATURE | | <u>55533</u> 212 | |

AUTHORIZED SIGNATURE

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

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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. PLAINFIELD, NJ 07060 VENDOR #ADRO1 ADRIAN'S CATERERS E P.O. BOX 2845 D PLAINFIELD NJ 07060

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11-00419

ORDER DATE:

04/01/11

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

| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|----------------|------------------------------------------------|------------------------------------|----------------------|-------------------------------|
| 1.00 1.00 | CATERING SERVICE FOR BOARD MEETING 04/14/11 | 1-07-05-300-305 1-09-05-300-305 | 187.5000 187.5000 | 187.50 187.50 |
| | | | TOTAL | 375.00 |
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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 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

VENDOR'S CERTIFICATION & DECLARATION

amount charged is a reasonable one.

NOTICE TO VENDOR OR CONTRACTOR

- 1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE.
- 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.
- 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.
- 4. 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

SIGNATURE

DATE

PAYMENT APPROVAL

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

EQUISITION APPROVAL

DEPARTMENT HEAD

PURCHASE ORDER APPROVAL

DATE

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

RLAINFIELD MUNICIPAL UTILITIES AUTHORITY 127 ROOSEVELT AVENUE • P.O. BOX 5110 **PURCHASE ORDER** PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561 PACKING SLIPS, CORRESPONDENCE, ETC No. 11-00419 127 ROOSEVELT AVE. ORDER DATE: 04/01/11 **REQUISITION NO:** PLAINFIELD, NJ 07060 **DELIVERY DATE:** STATE CONTRACT NO: VENDOR #:ADRO1 F.O.B. TERMS: ADRIAN'S CATERERS IRS #22-3419364 TAX EXEMPT UNDER PROVISIONS OF P.O. BOX 2845 N.J. SALES & USE TAX ACT (CHAPTER 30, LAW OF 1966). PLAINFIELD NO 07060 CHECK NO. _ CHECK DATE QUANTITY/UNIT DESCRIPTION ACCOUNT NO. UNIT PRICE TOTAL COST 1.00 1-07-05-300-305 187,5000 187.50 CATERING SERVICE 187,5000 1.00 1-09-05-300-305 FOR BOARD MEETING 04/14/11 187.50 375,00 TOTAL RECEIVING COPY MUST BE FORWARDED **VENDOR: DO NOT ACCEPT THIS ORDER** UNLESS SIGNED BY PURCHASING AGEN TO PURCHASING AS SOON AS ORDER IS RECEIVED. REQUISITION APPROVAL I HEREBY CENTIFY THAT THE ARTICLES ABOVE SPECIFIED HAVE BEEN RECEIVED OR THE SERVICES PERFORMED THE QUANTITY NOTED IS CORRECT, AND THE AS SPECIFIED, EXCEPT AS NOTED. DEPARTMENT HEAD DATE

RECEIPT VERIFICATION COPY

- FULL SIGNATURE

IOTES:

PURCHASE ORDER APPROVAL

PURCHASING AGENT SIGNATURE

ADRIAN'S CATERERS

PO BOX 2845 1300-08 EAST 210 STREET

PLAINFIELD, NJ 07062

(908) 754-8532

DATE 4/4///

| | DATE 4/14/11 |
|-------------------|------------------------------------------|
| | BANQUET INVOICE |
| ORGANIZATION; | Y/1/MJ |
| CUSTOMER: | H DOCKIE |
| ADDRESS: 12 | + Toosevelt I/ve |
| CITY/STATE | Plainfield NJ |
| PHONE: | |
| ROOM: | GUARANTEED # OF PEOPLE: FAX:#908226-4923 |
| F | 0#11-00419 |
| FOOD: Food for | Beings 1/4 \$375.00 |
| | |
| | |
| EQUIPMENT RENTAL: | |
| SERVICE CHARGE: | |
| TAX: | |
| MISCELLANEOUS: | |
| | SUB TOTAL: \$375.00 |
| | ADVANCE DEPOSIT: |
| | TOTAL: \$375.00 |
| SIGNATURE: | FILE#: |

11-07705-300-305

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| LAINFIELD MUNICIPAL UTILITIES AUTHORITY • PLAINFIELD, N.J. 07061-5110 | J. 07061-5110 | No. | 021493 |
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| endor: JOSEPH TRACEE JOSEPH 20: 11-00650 DESC: TRAVEL ALLOWANCE | | | 248.50 |
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PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

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| | 127 ROOSEVELT AVENUE • P.O. BOX 51 |
| | PLAINFIELD, N.J. 07061-5110 |
| | TEL (908) 226-2518 • FAX (908) 226-256 |
| 111111111111111111111111111111111111111 | |

NRIMDepartment of Treasury - Division of 127 ROOSEVELT AVE. PLAINFIELD, NJ 07060 VENDOR #: JOSEPH V E N D O R TRACEE JOSEPH

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC

No.

11-00650

ORDER DATE:

05/05/11

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

| | | | , | / / ' / |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------|
| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
| 1.00 1.00 | TRAVEL ALLOWANCE | 1-07-10-300-330 | 124.2500 124.2500 | 124.25 124.25 |
| 1.00 | WASTE EXPO DALLAS, TX | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| and the second s | 5/9/11 THRU 5/11/11 | | | ragge; page yaper Colon Sims books progressors in real books basis morte 6444 hours |
| | | · · | TOTAL | 248.50 |
| | | | 12 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | 2 (1) 2 (1) 2 (1) |
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| IMILATINE AANI | ALIPERACE PROPERTY AND LANDERS OF THE PROPERTY | HILLOIAP PAN BALLEPAID | 1 | |

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 or services rendered as stated therein; that no bonus has been given or received by any person or persons within the reaso Arocedures 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.

NOTICE TO VENDOR OR CONTRACTOR

VENDOR'S CERTIFICATION & DECLARATION

- 1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE.
- 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.
- 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.
- 4. 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

GNATURE

SIGNATURE

DATE

DATE

PAYMENT APPROVAL

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

DATE

PURCHASE ORDER APPROVAL

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

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

PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561

| *NELW Supart | ment of Treasure | v - Division of |
|--------------|------------------|-----------------|
| | | |
| PLAINFIEL | D. NJ 07060 | |
| | , | VENDOR #: |
| Philippin : | | |
| | : | JOSEPH |
| TRACEE JO | SEPH | JOSEPH |
| TRACEE JO |)SEPH | JOSEPH |

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC

No.

ORDER DATE:

05/05/11

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

| | | | / | 7/11 |
|---------------|----------------------------------------|------------------------------------|----------------------|-------------------|
| GUANTITY/UNIT | DESCRIPTION | ACCOUNT NO | UNIT PRICE | TOTAL COST |
| 1.00 1.00 | TRAVEL ALLOWANCE WASTE EXPO DALLAS, TX | 1-07-10-300-330 1-09-10-300-330 | 124.2500 124.2500 | 124.25 124.25 |
| | 5/9/11 THRU 5/11/11 | | TOTAL | 248.50 |
| | ECEIVING CORV MUST BE EOD | | | ACCEPT THIS OPDER |

RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

| I HEREBY CERTIF | Y THAT THE ARTICLE | S ABOVE SPECIFIED | HAVE BEEN/ RECEIVED | OR THE SERVICES |
|-----------------|--------------------|---------------------|------------------------|---------------------|
| PERFORMED, THAT | THE QUANTITY NOTED | IS CORRECT, AND THE | QUALITY IS AŞ SPEÇİFIE | D, EXCEPT AS NOTED. |
| A) 1 | 1 % 11 11 | | 11 14 1 1 | Separate S |

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

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

RECEIPT VERIFICATION COPY

| REQUISITION | PLAINFIELD MUNICIP | AL APPROVALS: |
|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| NUMBER | UTILITIES AUTHORIT | Y allmini Haghin |
| | Purchase Requisition | Dept Name |
| VENDOR NO.: | Date: 5/5/// | Jeach Juseph Originated Aythorization |
| VENDOR NAME: IRCCER. | Joseph | DMills |
| ADDRESS: | | Dep Authorization |
| ADDRESS: | · | Dhane Di Young |
| ADDRESS: | | Finance Authorization - Availability of Fund |
| ADDRESS: | | Purchasing Agent Authorization - Approval |
| - ZIP: | | Generate Purchase Order Number after mandatory requirements are satisfied. |
| BRC ON FILE: YESNO | | Note: Disease allow at least time (F) working |
| QUOTE ATTACHED: YESNO (For Values of \$1,000.00 or more.) | | Note: Please allow at least tive (5) working days from the date Requisition is received in the Purchasing Department before a |
| ACCOUNT CODE: 1 OP | 710-300330 | Purchase Order Number is issued. |
| | | SHIPPING INSTRUCTIONS |
| DATE NEEDED BY: | And the second s | Name: |
| EXPECTED DELIVERY TIME: | | Address: |
| SPECIAL INSTRUCTIONS: | | Address: |
| | | |

PLAINFIELD MUNICIPAL APPROVALS:

| ITEM CITY | UNIT | ACCOUNT | DESCRIPTION | AMOUNT | |
|-----------|------|---------|----------------------------|--------|----------|
| | | | Waste ELDO - Dullas IX | \$248 | 50 |
| | | | 5/9-5/11/2011 | | |
| | | | (5/8/11 +RAVEL DAY) | · | |
| | | | | | |
| | | | YEL DIEM KAKE | | <u> </u> |
| | | | \$71.00 DEL day | | |
| | | | (\$53.25 FIRST + LAST DAY) | | <u>.</u> |
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| | | | TOTAL | Way a | 200 |

PLAINFIELD MUNICIPAL
UTILITIES AUTHORITY
127 ROOSEVELT AVENUE • P.O. BOX 5110
PLAINFIELD, N.J. 07061-5110

A SINTERPLE

AINFIELD MUNICIPAL UTILITIES AUTHORITY • PLAINFIELD, N.J. 07061-5110

No. 021600

ndor: JOSEPH TRACEE JOSEPH
O: 11-00682 DESC: REIMBURSEMENT 237.33

05/20/11 \$******237.33



Mark is describe appearing



PLAINFIELD MUNICIPAL
UTILITIES AUTHORITY
127-ROOSEVELT AVENUE * P.O. BOX 5110
PLAINFIELD IN J. 07061-5110

GENERAL ACCOUNT

DATE

CHECKNO

05/20/11 21600

Bankof America
PLAINFIELD: N.J. 07061

No.

2 SIGNATURES REQUIRED IF OVER \$2000.00

021600

- 55-33

CNO

TANOUNT

212

\$*******237.33

Two Hundred Thirty Seven AND 33/100 Dollars

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FÖ THE ORDER OF TRACEE JOSEPH

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AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

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

| Pg. | | P.M.U.A 127 ROOSEVELT AVE. PLAINFIELD, NJ 07060 | |
|-----|--------|-------------------------------------------------------|----------------|
| | VEZBOR | TRACEE JOSEPH | VENDOR#:JOSEPH |

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11-00682

ORDER DATE:

05/16/11

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.

| DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| REIMBURSEMENT | 1-09-10-300-329 | 237.3300 | 237.33 |
| TRAVEL EXPENSES 2011 Wask Expo DALLAS, TX 5/8/11 - 5/11/11 | | | |
| | | TOTAL | 237.35 |
| | | | |
| | | | |
| | | | |
| | REIMBURSEMENT TRAVEL EXPENSES 2011 Wask Expo DALLAS, TX | REIMBURSEMENT 1-09-10-300-329 TRAVEL EXPENSES 2011 Wask Expo | REIMBURSEMENT 1-09-10-300-329 237.3300 TRAVEL EXPENSES 2011 Wask Expo DALLAS, TX 5/8/11 - 5/11/11 |

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 or services rendered as stated therein; that no bonus

VENDOR'S CERTIFICATION & DECLARATION

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.

CLAIMAN³

NOTICE TO VENDOR OR CONTRACTOR

- 1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE.
- 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY
- 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.
- 4. 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 prodedures.

SIGNATURE

PAYMENT APPROVAL

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

REQUISIT

DEPARTMENT HE

PURCHASE ORDER APPROVAL

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

DATE

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

PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 · FAX (908) 226-2561

| THE TOTAL PROPERTY OF THE PARTY | | |
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| Pg. S | P.M.W.A. 127 ROOSEVELT AVE. | |
| P P | wing . | |
| T 0 | PLAINFIELD, NJ 07060 | |
| | | VENDOR # JOSEPH |
| V | TRACEE JOSEPH | er till and time s 2 t |
| Ŋ | | |
| O R | | |

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC

No.

11-00682

ORDER DATE:

05/16/11

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

| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|---------------|---------------------------------------------------------------|-----------------|------------|------------|
| 1.00 | REIMBURSEMENT | 1-09-10-300-329 | 237.3300 | 237.33 |
| | TRAVEL EXPENSES 2011 WONE EXPO DALLAS, TX 5/8/11 - 5/11/11 | | | |
| | | | TOTAL | 237.33 |
| | | | | |
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RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

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| I HEREBY ERMIFY THAT THE | ARTICLES AROVE | SPECIFIED HAVE | BEEN BECEIVED | OR THE SERVICES |
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| PERFORMED, THAT THE QUANTITY | MINOTED IS CORRE | CT AND THE MUSE | TV IS AS SPECIFIED | EXCEPT AS NOTED |
| TELL OF SEC. A STATE GOTHER TO | I NOTED IO COLLINE | OI, AND THE GODE | | , ENOLI I AOJIO ILD. |
| | | X.3" | . /1 / 1- / | Securior all |

OTES:

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

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

RECEIPT VERIFICATION COPY



akb:expenstatment.xls

Plainfield Municipal Utilities Authority Expense Statement

| Statement | # |
|-----------|---|
| | |

5/12/2011

| Name SSN | Tracee Joseph | | | | ······································ | EMP # | Admin. | | | Pay Period | 5/8/2011 |
|-------------|-------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------|--------------|--------------|--------------|-----------|---------------|--------------------|
| Department | Administration | | | | | Manager | David E | rvin | | To: | 5/11/2011 |
| Date | Description | | | Lodging | Mileage | Tolls | Meals | Phone | Cabs | Other | |
| 05/08/2011 | Meals, Incidentals & Expenses | | | \$97.60 | | | \$31.79 | | \$20.00 | | |
| 05/09/2011 | Meals, Incidentals & Expenses | | | \$97.60 | | | \$3.00 | | \$30.00 | | |
| 05/10/2011 | Meals, Incidentals & Expenses | | | \$97.60 | | | \$44.00 | | \$10.00 | \$3.56 | • |
| 05/11/2011 | Meals, Incidentals & Expenses | | | | | | \$13.68 | | \$37.00 | | |
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| TOTAL | | | | \$292.80 | \$0.00 | \$0.00 | \$92.47 | \$0.00 | \$97.00 | \$3.56 | |
| IOIAL | <u> </u> | | | \$2,00 | Ψ0.00 | J | Ψ 32.37 | ψ0.00 | \$37.00 | SubTotal | \$485.83 |
| | A | প্ৰভাৱতীয়া কৰি কৰিব প্ৰভাৱত কৰিব সংগ্ৰহণ কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব | er gir van deuter under der einste einstelle gemeilte Stelle eine ein einem Germannen der Stelle eine der Stelle | NOT THE TIME TO THE THE | | | | | ĺ | | A Company |
| 1 | ANI PH | | | | | | | | | Total | \$485.83 |
| | 13/4 ells | | | | | | | | | es reported o | n the best of m |
| Approved by | | | | | - | | krowled | ge. VOl 1 | asepl | A accurate to | 248 (PF |
| | | | | | | | | Employee | oignature | Due | \$ 23 7 3 |

| REQUISITION NUMBER | PLAINFIELD MUNICIPAL UTILITIES AUTHORITY Purchase Requisition | Administration |
|---------------------------|---------------------------------------------------------------|--------------------------------|
| | Date: 5/12/1/ | Samue Sim |
| | / / | Originate Authorization |
| VENDOR NO.: | <u> </u> | Deny Authorization |
| VENDOR NAME: Tracee Jose | eph. | Duane D. young |
| ADDRESS: | <u>/</u> | Finance Authorization / |
| ADDRESS: | <u> </u> | Purchasing Agent Authorization |
| ADDRESS: | | |
| ADDRESS: | · | |
| ZIP: | | |
| BRC ON FILE: YES NO | | SHIPPING INSTRUCTIONS |
| ACCOUNT CODE: 11-09-10-30 | D-319 Name: _ | |

Address: _

SPECIAL INSTRUCTIONS:

| ITEM QTY. | UNIT ACCO | JNT | DESCRIPTION | | AMOUNT | |
|-----------|-----------|------|-------------|-------|--------|--|
| | | Romb | wrsement to | a l | | |
| | | Tr | Towel Exp | ouse. | | |
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| | | 2011 | Wask Expe | , | | |
| | | | Jallag TX | () | | |
| | | | OCKERAS, L. | | | |
| | | 5/ | 8/11 ~57 | 0/11 | | |
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| | | | | | | |
| | | | | TOTAL | かり211 | |



05-11-11

| A/R Number : | Arrival | | |
|--------------------------|-----------|---|----------|
| | | | 05-08-11 |
| Group Code : | Departure | : | 05-11-11 |
| US DESCRIPTION Company : | Conf. No. | : | 61347369 |
| Membership No. : | Rate Code | : | IMSTI |
| Invoice No. ; | Page No. | : | 1 of 1 |

| Date | | Description | A PARTICLE AND ADDRESS OF THE | Charges | Credits |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------|
| 05-08-11 | Package Rate | | | 85.00 | |
| 05-08-11 | State Tax (6%) | | | 5.04 | |
| 05-08-11 | City Tax (7%) | | | 5.88 | |
| 05-08-11 | Arena Tax (2%) | • | | 1.68 | |
| 05-09-11 | Package Rate | | | 85.00 | |
| 05-09-11 | State Tax (6%) | | | 5.04 | |
| 05-09-11 | City Tax (7%) | | | 5.88 | |
| 05-09-11 | Arena Tax (2%) | s | | 1.68 | |
| 05-10-11 | Package Rate | | | 85.00 | |
| 05-10-11 | State Tax (6%) | | | 5.04 | |
| 05-10-11 | City Tax (7%) | | | 5.88 | |
| 05-10-11 | Arena Tax (2%) | | | 1.68 | |
| 05-11-11 | MasterCard | | | | 292.80 |
| Thank you for staying at Holiday Inn - Dallas Market Center. Qualifying points for this stay will automatically be credited to your account. To make additional reservations online, update your account information or view your statement please visit www. priorityclub.com. We look forward to welcoming you back soon. | | lotai | 292.80 | 292.80 | |
| | | _{n.} Balance | 0.00 | | |

Guest Signature: Jewel Jalem

I have received the goods and / or services in the amount shown heron. I agree that my liablity for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



05-11-11

9002 The Shop Folio No. Room No. : 9002 **US DESCRIPTION** A/R Number Arrival 05-01-11 **Group Code** Departure 05-31-11 Company Conf. No. Membership No. Rate Code: INCMP Invoice No. Page No. : 1 of 1

| Date | | Description | | Charges | Credits |
|----------|-------------------|-------------|---------|---------|---------|
| 05-11-11 | Sundries | | | 0.92 | |
| 05-11-11 | Sales Tax (8.25%) | | | 0.08 | |
| 05-11-11 | Cash | | | | 1.00 |
| | | | Total | 1.00 | 1.00 |
| | N. | | Balance | 0.00 | |

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

5/4 total

STAR X CAB

| 4411 Ross Ave. www.sta | arcabcompany.com |
|--------------------------|---------------------------------------|
| Dallas, TX 75204 | 214-252-0055 |
| 24 Hour Dispatch Service | • Fax 214-821-7889 |
| Date | • We accept credit cards & time calls |
| | Time |
| Fare | Extra |
| DriverA(| |
| Cab Number | 4200 |
| We apprec | iate your business |

Name: _______
Amount Paid: _______
Shuttle Driver: _______
Shuttle Number: ________

BOOK YOUR RESERVATION ONLINE AT WWW.CITYSHUTTLE.NET

STARBUCKS COFFEE E8 DALLAS FT WORTH INT'L AIRPORT

5368 Tonya

CHK 2920 MAY11'11 12:43PM GST 1

Subtotal

| 1 HOT TEA T | 2.15 |
|-------------|-------|
| SUBTOTAL | 2.15 |
| TAX | 0.18 |
| AMOUNT PAID | 2.33 |
| Cash | 20.33 |
| CHANGE DUE | 18.00 |

THANK YOU FOR YOUR BUSINESS!!!
Tell us about your experience
will.collins@hmshost.com
Will Collins 972.574.8710
EMSHost DFW International Airpor

| Date: 05/08/11 | |
|-----------------------|---|
| Name: | |
| Amount Paid: #30 | |
| Shuttle Driver: Amere | • |
| Shuttle Number: /D/ | |
| | |

BOOK YOUR RESERVATION ONLINE AT WWW.CITYSHUTTLE.NET

| YE | LLOW CAB |
|---------------------|-----------------------------------------|
| Dalla | s / Fort Worth |
| Amount/Cuenta: | 3/6 Date/Fecha: 5/9/11 |
| Trip From/Viaje de: | Holiday Inn Dallas Yonvention Conley |
| Beverly | 210-396-8048 |
| Driver/ laxista: | Taxi #: |
| 110#: | |

LOCAL

DART
DAY PASS
\$4.00

53 0032

05/09/11 03:30 PM

| YELLOW CAB |
|---------------------------------------|
| Dallas / Fort Worth |
| Amount/Cuenta: #10 Date/Fecha: 5/9/// |
| Trip From/Viaje dé: MUMAN CONTE |
| To/Destinacion: Rosephor |
| Driver/Taxista: |
| ID#:Taxi #: |

SAINT ANN

2501 N Harwood Suite 1400 Dallas TX 75201 214.782.9807

Date:

May10'11 06:32PM

Card Type: VISA

XXXXXXXXXXX Acct #:

Card Entry: SWIPED Trans Type: PURCHASE Auth Code: 269628

Check:

3874 20/1

Table: Server:

1031 RICHARD

Subtotal:

TIP:

GUEST COPY (for your record

THANK YOU!!!

HOLIDAY INN - MA KEM'S RESTAURANT

4500 HARRY HINES DALLAS, TEXAS 75219 214-219-3333

1006 ANA

Tb1 11/1

- Chk 5810

Gst 1

May10'11 09:10AM

DINE

BUFFET

1 OPEN FOCE

8.00

ORIGINAL TTL TAX

09:10AM TOTAL

8.00 0.66 8,66

GRATUITY:

ROOM:

HOLIDAY INN - MA KEM'S RESTAURANT

4500 HARRY HINES ĎALLAS, TEXAS 75219 214-219-3333

1031 David S

Tb1 60/1

Chk 5880

May11'11 08:12AM

DINE

BUFFET

1 OPEN FOOD

8.00

ORIGINAL TTL

8.00

TAX 08:13AM TOTAL

0.66 8.66

GRATUITY: \$ 20E

ROOM:

FIOLIDAY INN MA ROOM SERVICE

4500 HARRY HINES BLVD DALLAS, TEXAS 75219 214-219-3333

1032 DAVID

| 1002 5 | | |
|------------------------------------------------------|--------------------|---------------------------------------|
| Chk 350 May08 | 511 '11 08:28PM | Gst 0 |
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| ORIGINAL TTL TAX 18% RM SVC 08:33PM TOTAL | | 21.00 1.73 3.78 - 5 1 |
| ADD'L GRAT: | | _ |
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Paradies Shops - NELARK Newark Liberty Int. Airport Newark, NJ

PURE LIFE WATER

46362472000

2.29 T

FIBER ONE

25878200000

2.99 N

TOTAL

\$5.28

CASH

\$10.00

CHANGE

ORIGINAL TTL TAX

BST 4 VALUE

2.00 7.50

\$4.72

ITEMS 2

L, FABIOLA

U5/08/2011 04:11PM

American Greed Wednesdays on CNBC americangreed.cnbc.com

1031 David S

Chk 5744 May09'11 08:29AM

DALLAS, TEXAS 75219 214-219-3333

08:30AM TOTAL GRATUITY: 10 . 0.79 0.78 0.78

HOLIDAY INN - MA KEM'S RESTAURANT

1.00 REIMBURSEMENT 1-09-60-600-521 23.0900 23.09
FOR: 4/15/11 LUNCH
AT SHREDDING PROGRAM
TRANSFER STATION

MUR01

11-00604

TOTAL

23.09

04/28/11

1

P.M.U.A.

127 ROOSEVELT AVE.

MILTON MURPHY

PLAINFIELD, NJ 07060

Pg.



PLAINFELD MUNICIPAL
UTILITIES AUTHORITY
UTILITIES AUTHORITY
UTILITIES AUTHORITY
UTILITIES AUTHORITY
UTILITIES AUTHORITY

SEKERAL ACCOUNT

111/50/50

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PLACESTER ALL CORE Bank of Armerica

No. 021473

AMOUNT

ORX RO 22473

\$4********

Twenty Three AID 09/100 Dollars

KILTON KIRPHY

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IZED SIGNATURE

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

PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 • FAX (908) 226-2561

P2 . ROOSEVELT AVE. PLAINFIELD, NJ 07060 VENDOR #CARTER GEORGE CARTER

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11-00603

ORDER DATE:

04/28/11

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

| | . 9 | | | |
|-----------------------------------------|--------------------------------|--------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
| 1.00 | REIMBURSEMENT | 1-09-65-600-399 | 9.0000 | 9.00 |
| | FOR: TOLLS 4/26/11 | | | |
| | FLEET MAINTENANCE | • | Name A | Total section where account hadron service belook species grands and our proof, there's lightly |
| | | | TOTAL | |
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| | | | MAY - 3 | 2011 |
| | | | Purchasing | l Agent |
| OUCHER COPY | - SIGN AT X AND RETURN WITH II | NVOICE FOR PAYMENT | | |

DATE

| | | THE RESERVE AND ADDRESS OF THE PARTY AND ADDRE |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | I do solemnly declare and certify under the penalties of the the within bill is correct in its particulars; that the articles he furnished or services rendered as stated therein; that is has been given or received by any person or persons of the powledge of this claimant in connection with the above of | ave been no bonus within the |
| * | the amount therein stated is just, due and owing; and | |
| * | amount charged is a reasonable one. | |
| Y | Wan 1 () 5/ | 11/11 |
| ∕\. | 1 2000 | <u> </u> |

VENDOR'S CERTIFICATION & DECLARATION

NOTICE TO VENDOR OR CONTRACTOR

1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE.

LAIMANT

- 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.
- 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.
- 4. INVOIVE MUST BE FOWARDED TO ORIGINATING DEPARTMENT WITH SIGNED VOUCHER.

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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.

PAYMENT APPROVAL

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

REQUISITION APPROVAL

DEPARTMENT HEAD

3:11 DATE

PURCHASE ORDER APPROVAL

DATE SIGNATURE

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

PLAINFIELD MUNICIPAL ULILLIES AUTHO

PURCHASE ORDER

| PAC | KING SLIPS, | CORRE | SPO | IDE | VCE, E | TC. | | |
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ORDER DATE:

04/28/11

REQUISITION NO: DELIVERY DATE:

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

| OUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|---------------|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.00 | REIMBURSEMENT | 1-09-65-600-399 | 9.0000 | 9.00 |
| | FOR: TOLLS 4/26/11 | | | |
| | PLEET MAINTENANCE | | | alatoh separa dalah selah br>Selah selah se |
| | | en de la companya de | TOTAL | 9.00 |
| | | | | |
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RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

| I HEREBY CERTIFY THAT | THE ARTICLES ABO | OVE SPECIFIED | HAVE BEEN | RECEIVED OR THE | SERVICES |
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DATE RECEIVED

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

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DATE

PURCHASE ORDER APPROVAL

PURCHASING AGENT SIGNATURE

5/3/2011

| REQUISITION | • | |
|-------------|---|--|
| NUMBER | | |



Purchase Requisition

| AP | PF | O? | VΑ | LS: |
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| | $\overline{}$ | | | |

| Cirt | MainteNANCE |
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| rueer | MINIETANTADE |
| | |

Dept. Name

| VENDOR ID: | 4.26 | . 11 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------|
| Undinator Authorization / | , Da | ate |
| VENDOR NAME: GEORGE CARIELSR. | 41 | 27/1 |
| ADDRESS: 95 ROCK AVE Dept. Authorization | ,Dat | te / |
| ADDRESS: Plainfield | 4/1 | 17/ |
| ADDRESS: NS 07060 Certification of Funds By: Chief Financial Officer | Dat | te |
| ADDRESS: | | |
| ZIP: Purchasing Agent Authorization - Ap to Generate Purchase Order Numb | • | Date |
| BRC ON FILE: YESNO mandatory requirements are satisfied | | |
| QUOTE ATTACHED: YES NO (For Values of \$1,000.00 or more.) | | |
| ACCOUNT CODE(s): 09-65-600-399 Note: Please allow at least three (3 days from the date Requisition of the control of the cont | , | ed |
| in the Purchasing Departme. Purchase Order Number is in | nt <u>before</u> a | |
| DATE NEEDED BY: SHIPPING INSTRUCTION | ue | |
| | <u>vo</u> | |
| EXPECTED DELIVERY TIME:Name: | | _ ` |
| SPECIAL INSTRUCTIONS: Address: | | _ . |
| Address: | | _ |
| ITEIMBURSEMENT FOR TOILS | | |
| ITEM CITY UNIT ACCOUNT DESCRIPTION | AMOUNT | |
| TO & FROM Connecticut | | |
| NJ. PARKWAY | 1 | |
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| PECEIST ATTACHED | | |

NOTE: EMERGENCY PURCHASES are governed by NJSA 40A: 11-6

TOTAL

N. J. Turnpike Authority



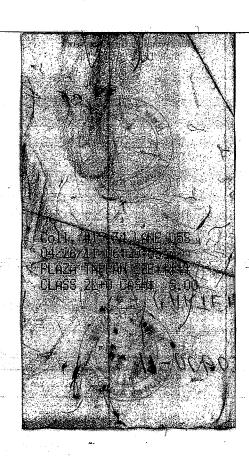
GARDEN STATE PARKWAY

DATE: 04/26/2011 05:52 PLZ: 004

LN: 07 COLL: 011209

CLS 01 PAID \$1.00

EZPASS SPEEDS YOUR TRIP



, N. J. Turnpike Authority



GARDEN STATE PARKWAY

DATE: 04/26/2011 11:17 PLZ: 015 LN: 04 COLL: 002295

CLS 01 PAID \$1.00

EZPASS SPEEDS YOUR TRIP

N. J. Turnpike Authority



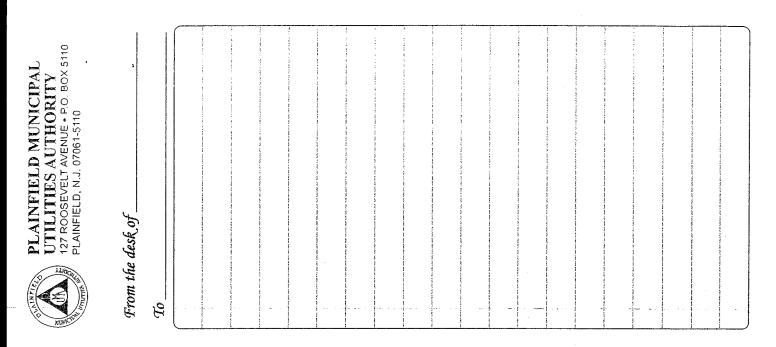
GARDEN STATE PARKWAY

DATE: 04/26/2011 11:03 PLZ: 001

LN: 03 COLL: 004890 CLS 01 PAID \$1.00

EZPASS SPEEDS YOUR TRIP

GARDEN STATE PAIRKLAY



AINFIELD MUNICIPAL UTILITIES AUTHORITY • PLAINFIELD, N.J. 07061-5110

021707 No.

NET AMOUNT REFERENCE/DESCRIPTION endor: MATTHEW MATTHEW'S TOWING o: 11-00631 DESC: 125.00 INV: 006088



\$*******125.00 06/15/11



PLAINFIELD MUNICIPAL UTILITIES AUTHORITY PLAINFIELD, N.J. 07061-5110

DATE

Bankof America PLAINFIELD, N.J. 07061

No.:

021707

CHECK NO.

AMOUNT

06/15/11

21707

\$*******125.00

One Hundred Twenty Five AND 00/100 Dollars

O THE **DRDER**

OF

MATTHEW'S TOWING 222 COURT PLACE PLAINFIELD, NJ 07060 USA

2 SIGNATURES REQUIRED IF OVER \$2000.00

AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

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

o R

1271 ROOSEVELT AVE.

PLAINFIELD, NJ 07060

VENDOR #MATTHEW

MATTHEW'S TOWING 222 COURT PLACE PLAINFIELD

NJ 07060

USA

PURCHASE ORDER

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

No.

11-00631

ORDER DATE:

04/29/11

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

| , , | en e | | | |
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| QUANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
| 1.00 | TOWING OF TRUCK #225 | 1-09-43-600-539 | 125.0000 | 125.00 |
| | FLEET MAINTENANCE | | | |
| | | | TOTAL | 125.00 |
| | | | | |
| · | R | ECEIVED | s e | |
| | / · | JUN 0 3 2011 | | |
| | Fin | ance Department | | |
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| 1 college en la college en la college en la college college en la colleg | dia palia. E. E. de escrit de p. | MARIO O DE 17 AFRES 2000 NOTO AFRES 1800, AND AFRES 18 SERVICE ENCOR | | |

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

VENDOR'S CERTIFICATION & DECLARATION

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 owing; and that the the amount thereid stated is justly due a

ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURE. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY

3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.

NOTICE TO VENDOR OR CONTRACTOR

DATE

SIGNATURE

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.

5.3.11 DATE

PAYMENT APPROVAL

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

REQUISITION APPROVAL

DEPARTMENT HEAD

5.3.11 DATE

PURCHASE ORDER APPROVAL

SIGNATURE

INVOIVE MUST BE FOWARDED TO ORIGINATING DEPARTMENT. WITH SIGNED VOUCHER.

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

PLAINFIELD MUNICIPAL UTILITIES AUTHORITY 127 ROOSEVELT AVENUE P.O. BCX 5110 PLAINFIELD, N.J. 07061-5110 TEL (908) 226-2518 FAX (908) 226-2561 PQ. H. P.M.U.A. 127 ROOSEVELT AVE. PLAINFIELD, N.J. 07060 VENDOR #MATTHEW MATTHEW'S TOWING 222 COURT PLACE PLAINFIELD N.J. 07060 USA

PURCHASE ORDER

PACKING SLIPS, CORRESPONDENCE, ETC.

No.

11-00631

ORDER DATE:

04/29/11

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

| UANTITY/UNIT | DESCRIPTION | ACCOUNT NO. | UNIT PRICE | TOTAL COST |
|--------------|----------------------|-----------------|------------|------------|
| 1.00 | TOWING OF TRUCK #225 | 1-09-43-600-539 | 125.0000 | 125.00 |
| | FLEET MAINTENANCE | | | |
| | | | TOTAL | 125.00 |
| | | | | |
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RECEIVING COPY MUST BE FORWARDED TO PURCHASING AS SOON AS ORDER IS RECEIVED.

| I HEREBY CERT | IFY THAT THE | ARTICLES ABOVE | SPECIFIED F | HAVE BEEN | RECEIVED (| OR THE | SERVICES |
|---------------|----------------|-----------------|----------------|---------------|------------|----------|----------|
| PERFORMED, TH | AT THE QUANTIT | Y NOTED IS CORR | ECT, AND THE C | QUALITY IS AS | SPECIFIED, | EXCEPT A | S NOTED. |

RECEIVED BY - FULL SIGNATURE

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Complete

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

REQUISITION APPROVAL

DEPARTMENT HEAD

DATE

PURCHASE ORDER APPROVAL

PURCHASING AGENT SIGNATURE

RECEIPT VERIFICATION COPY

| REQUISITION | | |
|-------------|--|--|
| TIEGOTOTTON | | |
| NUMBER | | |
| MOMBED | | |
| • | | |

VENDOR NAME: MATTHEW'S TOWING

ADDRESS: Plainfield W 07060

ACCOUNT CODE(s): 09-43-600-539

ADDRESS:

ADDRESS:

BRC ON FILE: YES ____NO ____

QUOTE ATTACHED: YES NO (For Values of \$1,000.00 or more.)

VENDOR ID:

DATE NEEDED BY:

EXPECTED DELIVERY TIME:



PLAINFIELD MUNICIPAL UTILITIES AUTHORITY

Purchase Requisition

APPROVALS:

| FIZET | Maintenance |
|------------|-------------|
| Dept. Name | |

| Dept. Name | |
|--------------------------------------------------------------------|-----------------|
| Discovered Originator Authorization | 4 28 11 Date |
| Dept. Authorization | 4/28/ |
| 34 | (4/1) Date / |
| Cedification of Funds By: Chief Financial Officer | / Dafe |
| Purchasing Agent Authorization - | Approval Date |
| to Generate Purchase Order Num mandatory requirements are satis | ber after |

Note: Please allow at least three (3) working days from the date Requisition is received in the Purchasing Department before a Purchase Order Number is issued.

TOTAL

125

SHIPPING INSTRUCTIONS

| EXPLOIDE BELIVEIN TIME | | | Name: | |
|------------------------|---------|-------------------------------------------|----------|--------|
| SPECIAL INSTRUCTIONS: | | | Address: | |
| . • | | | Address: | · · · |
| | Toa | sing of Truck#22 | 5 | |
| ITEM CITY UNIT | ACCOUNT | | | AMOUNT |
| | | TRUCK # ZZ5 | TOWED to | 125 50 |
| | | cottage Place Aelington; Plainfield | e FROM | |
| | | Actington; | WTSTreet | |
| | | Plaintield | . Us | |
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| | | W11-400 |) | |
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| | | [.] | | |
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| | | | | |

MATTHEW'S TOWING

222 Count Place
Plainfield, NJ 07060
Phone (908) 756-3872
FAX # (908) 791-3222

TOWING REPORT

| NAME) | UNICIDES OTHITS | PAY METHOD |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| WADDRESS | AA | CASH |
| CITY | STATE ZIP | Q CHECK # |
| E CITY | STAIL ZII | CREDIT CARD |
| PHONE | | ☐ ON ACCOUNT |
| | | |
| | AM REQUESTED BY PM REGISTRATION NO. | 7 MILEAGE BEFORE TOW 8 8 10 11 12 13 14 15 16 17 |
| LOCATION OF VEHICLE OLX W | | ROOD |
| MILEAGE | SERVICE TIME | EXTRATIME |
| FINISH | FINISH | FINISH |
| START | START | START |
| TOTAL | TOTAL | TOTAL |
| A. H | | SPECIAL EQUIPMENT |
| ☐ SLING/HOIST TOW | O FLAT TIRE | ☐ SINGLE LINE WINCHING |
| O WHEEL LIFT | OUT OF GAS | D DUAL LINE WINCHING |
| ☐ FLAT BED/RAMP | D RECOVERY | ☐ SNATCH BLOCKS ☐ SCOTCH BLOCKS |
| D LOCK OUT | RECOVERY | O SCOTCH BLOCKS |
| | | |
| LEFT ON UNATTENDED PREMIS | VEHICLE MAY BE DAMAGED IF W ES. I RECOGNIZE THE DIFFICULTY SPONSIBLE FOR SUCH DAMAGE | INVOLVED AND LAGREE NOT TO |
| SĮGNATURE OF C | CAR OWNER OR AGENT | DATE |
| | BE RELEASED UNTIL TOW | ING SERVICE IS PAID. |
| REMARKS 125 | 8 | MILEAGE CHG. |
| 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | TOWING CHG. 125 |
| <u> </u> | | LABOR CHG |
| TRUCK 225 | | STORAGE CHG. |
| | The second secon | |
| | | |
| | | SUBTOTAL |
| SIGNATURE OF TOW OPERATOR | DATE | TAX |
| AUTHORIZED SIGNATURE | DATE | TOTAL 125 |