

PURCHASE ORDER

BUDGET YEAR

BEVERLY CITY BOARD OF EDUCATION

601 BENTLEY AVENUE, BEVERLY NJ 08010

Tel 609-387-2810 • Fax 609-387-1549

TAX ID# 216000134

VENDOR NO.

ALL INVOICES AND CORRESPONDENCE MUST BE SENT TO ABOVE ADDRESS REGARDLESS OF SHIPPING POINT.

PURCHASE ORDER NUMBER

THIS NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES AND CORRESPONDENCE.

DATE:

VENDOR:

SHIP TO:

VENDOR IS REQUIRED TO SUPPLY A COPY OF N.J. BUSINESS REGISTRATION AND W-9 CERTIFICATE PRIOR TO PAYMENT OF SERVICES

REQUISITION NUMBER		NAME		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT

CLAIMANT'S CERTIFICATION & DECLARATION

NO ORDER VALID UNLESS SIGNED BY THE BOARD SECRETARY

I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one. Furthermore, I have read and understand the information on the back of this form.

Secretary, Board of Education _____

Requested by _____ Date _____

Approved by _____ Date _____

FOR OFFICIAL USE ONLY: Payment Authorized - The above claim was ordered paid at a meeting of the Board of Education.

Date Paid _____ Check No. _____ Amount _____

PAYMENT APPROVAL

X

SIGNATURE _____ TITLE _____ DATE _____

OFFICER'S 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.

Delivery Slips received & checked.

SIGNATURE _____ DATE _____

SIGNATURE _____ TITLE _____ DATE _____