

**BOARD OF EDUCATION
FRANKLIN LAKES SCHOOL DISTRICT**

490 PULIS AVE., FRANKLIN LAKES, NJ 07417 / (201) 891-1866 / FAX (201) 891-9333

2010-09-16-2

1. All shipments F.O.B. your plant. Ship prepaid & add to invoice.
2. Our enclosed voucher must be signed and returned to the Secretary of the Board of Education before payment is made.
3. Purchaser is exempt from all Federal, State and Municipal Excise and Sales Taxes.
4. The Board of Education reserves the right to cancel this order if shipment cannot be made by the date required.

PURCHASE ORDER NO.
THE ABOVE NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES, DELIVERY TICKETS, PACKING SLIPS, ETC.
PURCHASE ORDER DATE
DATE REQUIRED
VENDOR NUMBER

TO:

SALES TAX EXEMPTION NO. 22-8001818

SHIP TO – SCHOOL:

SIGN AND RETURN THIS PAGE WITH YOUR INVOICE

QTY.	DESCRIPTION	UNIT PRICE	AMOUNT

<p>CLAIMANT'S SIGNATURE AND DECLARATION</p> <p>I do solemnly declare and certify under the penalties of 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 with 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 is a reasonable one.</p> <p>_____ CLAIMANT'S SIGNATURE</p> <p>_____ OFFICIAL POSITION (If Firm is Vendor)</p>	<p>PRICES CHECKED & CERTIFIED BY:</p> <p>..... FINANCE COMMITTEE</p> <p>.....</p> <p>PAYMENT AUTHORIZED</p> <p>The above claim was ordered paid at a meeting held</p> <p>....., 19____</p> <p>..... SECRETARY</p>	<p>PAYMENT DATE</p> <p>.....</p> <p>WARRANT NO.</p> <p>.....</p> <p>AMOUNT, \$</p> <p>.....</p> <p>ACCOUNT CHARGED</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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