BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00016

ORDER DATE: 01/09/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 8698
DATE PAID 3-28-17 MG

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00/BX	FRESHENER,AIR,CITRS,6/BX	7-01-26-310-239	43.9900	87.98
	INVOICE NO. 3327496920 1/19/17			
1.00/BX	FINE LINEN IVORY 24LB 500CT	7-01-26-310-239	28.3800	28.38
2.00/EA	FORMULA 409 CLNR DEGRSER 32OZ	7-01-26-310-239	3.4900	6.98
2.00/PK	CLOROX WIPES VALUE PK 3/75CT	7-01-26-310-239	13.9900	27.98
1.00/CT	TRASHBAG 33X40 31-33GAL XHVY	7-01-26-310-239	24.8400	24.84
1.00/CT	LINER, 24X32, .35MIL, BK	7-01-26-310-239	53.8800	53.88
1.00/CT	EKCSCRN 60 DY GREEN APPLE 12CT	7-01-26-310-239	77.3800	77.38
3.00/PK	DISPOSABLE VACUUM BAG 3PK	7-01-26-310-239	3.0600	9.18
2.00/CT	BOUNTY 12 HUGE ROLL SAS 158SH	7-01-26-310-239	35.4900	70.98
2.00/EA	RUB WET MOP HEAD 16IN	7-01-26-310-239	2.8000	5.60
2.00/EA	PLEDGE MULTI SURFACE CLEANER	7-01-26-310-239	3.6000	7.20
1.00/EA	POLISH STAINLESS STEEL	7-01-26-310-239	6.6900	6.69
2.00/CT	ANGEL SFT ULT 2PLY BATH TISSUE	7-01-26-310-239	42.0800	84.16
1.00/EA	HP 131A (CF212A) YELLOW TONER	7-01-20-120-239	73.9900	73.99
1.00/EA	HP 131A (CF211A) CYAN TONER	7-01-20-120-239	73.9900	73.99
1.00/EA	HP 131A (CF213A) MAGENTA TONER	7-01-20-120-239	73.9900	73.99
	INVOICE NO. 3326853031 1/12/17			
			TOTAL	713.20

Invoice 3327496920
3326853031

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

L Barton 4/10/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

Jennifer Gable
COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00050

ORDER DATE: 01/19/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 8698
DATE PAID 3-28-17 mj

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/PK	SCOTCHMAGIC TAPE 3/4X1000 10PK	7-01-20-140-239	11.9900	11.99
1.00/EA	STAPLES ADJUST 40-SHEET PUNCH	7-01-20-140-239	41.4600	41.46
3.00/EA	UNIVERSAL T.S. B/R RIBBON	7-01-20-140-239	5.9900	17.97
2.00/EA	UNIVERSAL T.S. B/R RIBBON	7-01-20-120-239	5.9900	11.98
1.00/CT	STAPLES 8.5X11 3HOLE COPY CS	7-01-20-140-239	35.8900	35.89
3.00/PK	STAPLES 5-TAB WRITE-ON 4PK	7-01-20-140-239	4.2700	12.81
1.00/EA	2017 ATAGLNC WKLY WINE 8X11	7-01-20-120-239	19.9900	19.99
1.00/CT	HAM 8.5X11 COPY CS	7-01-20-120-239	51.0200	51.02
1.00/EA	MARKER 24148 MARKMSTR JMBO BK	7-01-20-120-239	3.5600	3.56
1.00/EA	MRKR MRKSALOT CHSL RD EACH	7-01-20-120-239	3.7900	3.79
5.00/PK	PETE 16-18 OZ PLSTIC COLD CUP	7-01-26-310-239	4.2000	21.00
	INVOICE NO. 3328257194 1/27/17			
1.00/CT	SANICLOTH SUPR 8X14 65PK/6CT	7-01-26-310-239	58.0900	58.09
2.00/PK	SOLO PETE 16 OZ COLD CUP LID	7-01-26-310-239	3.8700	7.74
	INVOICE NO. 3328257198 1/27/17			
2.00/BX	CLASP ENV BRN KRAFT 9X12-100	7-01-20-120-239	5.1100	10.22
	INVOICE NO. 3328257199 1/27/17			
			TOTAL	307.51

Invoices 3328257194
3328257198
3328257199

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

L Barton 4/10/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

Jennifer Labbe
COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00126

ORDER DATE: 02/23/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 46855 8719

DATE PAID 4-12-17 mj

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00/EA	MONTHLY DESK PAD VIRGIN PAPER	7-01-20-120-239	3.2200	6.44
1.00/EA	20X36 KRYSTAL VIEW MICROBAN NG	7-01-20-120-239	24.9800	24.98
1.00/PK	STAPLES 18PK GLUE STICK CLEAR	7-01-20-120-239	1.5000	1.50
1.00/EA	HP 81A BLACK LASERJET TONER	7-01-20-140-239	83.9000	83.90
1.00/EA	HP 81A BLACK LASERJET TONER	7-09-55-502-239	83.8900	83.89
2.00/RM	PASTELS 8.5X11 BLUE PAPER RM	7-01-20-130-239	3.4300	6.86
2.00/DZ	PAPERMATE RT BP BOLD BLUE 12	7-01-20-130-239	6.3600	12.72
4.00/PK	STAPLES 2PK STANDARD STAPLES	7-01-20-130-239	5.7900	23.16
1.00/PK	SBL INVISIBL TAPE 3/4X1296 6PK	7-01-20-130-239	3.7500	3.75
1.00/DZ	POST-IT 3X3 POP CNRY 12P	7-01-20-130-239	9.9600	9.96
	INVOICE NO. 3332076286 2/28/17			
			TOTAL	257.16

Invoice 3332076286

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 4/8/17 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00191

ORDER DATE: 03/22/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: GRAMC

GRAMCO
1149 BLOOMFIELD AVE.
CLIFTON, NJ 07012-2314

Phone: (973)773-8500 Fax: (973)773-8555

PAYMENT RECORD

CHECK NO. 8707

DATE PAID 4-12-17 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	LIBERTY DIGITAL RECORDING SYSTEM - HARDWARE/SOFTWARE SUPPORT	7-01-20-120-201	487.5000	487.50
1.00	LIBERTY DIGITAL RECORDING SYSTEM - HARDWARE/SOFTWARE SUPPORT	7-01-21-180-201	487.5000	487.50
	CONTRACT TERM 4/27/17 - 4/26/18			
	OFFER NO. 2649 3/2/17			
			TOTAL	975.00

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X _____
VENDOR SIGN HERE

mr 4-5-17
OFFICIAL POSITION DATE

222218889
TAX ID NO. OR SOCIAL SECURITY NO.

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.

L Barton 4/18/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

Jennifer Kable
COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00263

ORDER DATE: 04/19/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: GRAMC

GRAMCO
1149 BLOOMFIELD AVE.
CLIFTON, NJ 07012-2314

Phone: (973)773-8500 Fax: (973)773-8555

PAYMENT RECORD

CHECK NO. 8755

DATE PAID 5-10-17

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	TASCAM 4 CH USB DIGITAL MIXER	7-01-20-120-201	295.0000	295.00
	CALIBRATE 8 CH & 4 CH MIXERS			
	TEST ALL FUNCTIONS			
2.00	SERVICE CHARGE	7-01-20-120-201	250.0000	500.00
	INSTALL UPDATED LCR RECORDING SOFTWARE			
	INSTALL 4 CH AUDIO KEY			
	INVOICE NO. 17-126 2/3/17			
			TOTAL	795.00

Please sign at vendor line and return for invoice payment.

Thank you!

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

L Barton 4/20/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 ~~East~~ Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00398

ORDER DATE: 06/16/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 8857
DATE PAID 7-11-17 my

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	HP 05X HY BLACK TONER	7-01-20-120-239	136.4000	136.40
1.00/PK	STAPLES MED BINDER CLIPS 24CT	7-01-20-120-239	2.3100	2.31
1.00/DZ	SHARPIE FINE PERM BLACK 12/DZ	7-01-20-120-239	5.2200	5.22
1.00/EA	MARKER SHARPIE CHISEL TIP BLK	7-01-20-120-239	0.9200	0.92
1.00/EA	AAG 17 DESK CAL BASE	7-01-20-120-239	19.9200	19.92
	INVOICE NO. 3343916284 6/24/17			
1.00/EA	2017 DAILY ATAGLNC REFILL 3X6	7-01-20-120-239	3.9900	3.99
	INVOICE NO. 3343916288 6/24/17			
			TOTAL	168.76

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X _____
VENDOR SIGN HERE

_____
OFFICIAL POSITION DATE

_____
TAX ID NO. OR SOCIAL SECURITY NO.

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.

Helen Marano 7/7/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00482

ORDER DATE: 07/14/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9121

DATE PAID 12-27-17 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/BX	FASTNR FOLDR LTR KRAFT 50 INVOICE NO. 3346150864 7/15/17	7-01-20-120-239	31.1200	31.12
			TOTAL	31.12

Pdfax 11/10

Please sign at vendor line and return for invoice payment. Thank you!

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

Helen Marino 8/30/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00603

ORDER DATE: 09/09/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD

CHECK NO. 9121

DATE PAID 12-27-17 MJ

NOTICE: TAX ID #22-6001634 = TAX EXEMPT

SHIP TO

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614 ✓

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00	#954080 Clerk toner high yield	7-01-20-120-239	70.3700	140.74
1.00	#225087 Clerk mesh file sorter	7-01-20-120-239	5.8300	5.83
			TOTAL	146.57

Invoice #3352433141
9-12-17

Please sign & fax back

Copy 11/16

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

Helen Marino 9/20/17
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00695

ORDER DATE: 11/10/17
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9228

DATE PAID 3-13-18 MY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	MESH 8 TIER INCLINE SORTER BLK	7-01-20-130-239	14.1900	14.19
4.00/PK	NXT-FRAME HANG DBL RL	7-01-20-120-239	25.9900	103.96
3.00/PK	NXT-FRAME HANG DBL RL	7-01-20-130-239	25.9900	77.97
2.00/CT	BOX FILE LTR/LGL WHITE 12/CT	7-01-20-120-239	23.8100	47.62
2.00/PR	BOOKEND/STEEL/NONSKID-9 BLK	7-01-20-120-239	6.9000	13.80
	INVOICE NO. 3359119276 11/11/17			
1.00/EA	CUST SELF INK STAMP3/8X2-3/4IN	7-01-20-130-239	18.1400	18.14
	INVOICE NO. 3360309297 11/25/17			
			TOTAL	275.68

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Gale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00009

ORDER DATE: 01/11/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: NJLLP

NJ LABOR LAW POSTER SERVICE
2020 PENNSYLVANIA AVE
NW# 867
WASHINGTON, DC 20006-1811

Phone: (877)321-4144 Fax: (888)442-4144

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	2018 STATE AND FEDERAL LABOR LAW POSTERS	8-01-20-120-239	39.5000	39.50
			TOTAL	39.50

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00022

ORDER DATE: 01/18/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9319

DATE PAID 5-10-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/PK	STAPLES 100PK DVD+R SPINDLE	8-01-20-100-239	29.9900	29.99
2.00/EA	STAPLES 32GB FLASH DRIVE 2.0	8-01-20-100-239	15.7900	31.58
3.00/EA	STAPLES 16GB FLASH DRIVE 2.0	8-01-20-100-239	11.4900	34.47
1.00/PK	STAPLES 8GB FLASH DRI 2.0 5PCK	8-01-20-100-239	33.9900	33.99
2.00/PK	3TAB FILE FLDR ASST LBL	8-01-20-130-239	2.7400	5.48
1.00/BX	3TAB FLDR LTR ASST 100	8-01-20-120-239	9.9200	9.92
1.00/EA	2018 AAG 2MONTH VIEW 22X29	8-01-20-130-239	19.1400	19.14
	INVOICE NO. 3365922026 1/20/18			
1.00/EA	WHITE STAPLE FREE STAPLER	8-01-20-120-239	13.9900	13.99
	INVOICE NO. 3370777618 3/3/18			
			TOTAL	178.56

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 5/2/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00042

ORDER DATE: 01/24/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: MGL

MGL PRINTING SOLUTIONS
154 SOUTH ST.
NEW PROVIDENCE, NJ 07974

Phone: (908)665-1999 Fax: (908)665-1880

PAYMENT RECORD

CHECK NO. 9178

DATE PAID 2-15-18 (MV)

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
3.00	MIN BOOK-HB2 LEGAL 500 PG	8-01-20-120-239	118.0000	354.00
3.00	14" FILLER SHEET 250/PK	8-01-20-120-239	62.0000	186.00
1.00	SHIPPING & HANDLING	8-01-20-120-239	18.0000	18.00
	INVOICE NO. 152143 1/15/18			
			TOTAL	558.00

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X Matthew G. Fowler
VENDOR SIGN HERE

member 1/29/18
OFFICIAL POSITION DATE

22-3092413
TAX ID NO. OR SOCIAL SECURITY NO.

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.

Helen Marino 2/7/18
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

~~1001~~ East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.
NO. 18-00136

ORDER DATE: 02/27/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD	
CHECK NO.	9228
DATE PAID	3-13-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	DURAFLEX MONTHLY PLANNER BLACK	7-01-20-130-239	8.2400	8.24
1.00/EA	DURAFLEX MONTHLY PLNNR BLACK	7-01-20-130-239	7.3600	7.36
1.00/BX	CLASP ENV BRN KRAFT 6X9 - 100	7-01-20-120-239	5.4400	5.44
1.00/RM	BRIGHTS 8.5X11 ASST RM	7-01-20-120-239	12.7800	12.78
1.00/PK	PASTELS 8.5X11 ASST PAPER 400	7-01-20-120-239	12.0200	12.02
1.00/PK	RUBBERBAND #117B 1 LB	7-01-20-120-239	6.9900	6.99
1.00/RM	PASTELS 8.5X11 CANARY PAPER RM	7-01-20-130-239	4.7200	4.72
1.00/RM	PASTELS 8.5X11 BLUE PAPER RM	7-01-20-130-239	4.7100	4.71
1.00/RM	PASTELS 8.5X11 GREEN PAPER RM	7-01-20-130-239	4.7100	4.71
	INVOICE NO. 3356640662 10/21/17			
1.00/BX	7 3/8 X 9 5/8 CONFORMER MAILER	7-01-20-120-239	32.9900	32.99
	INVOICE NO. 3357346361 10/28/17			
			TOTAL	99.96

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00166

ORDER DATE: 03/13/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9319

DATE PAID 5-10-18 MW

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/CT	TOWEL MULTIFOLD 01890	7-01-26-310-212	28.3800	28.38
2.00/CT	TOWEL MULTIFOLD 01890	8-01-26-310-212	28.3800	56.76
3.00/CT	STAPLES 8.5X11 COPY CS	7-01-20-100-239	36.2000	108.60
1.00/EA	SECURE-A-PEN ANTIM REPLACE BLU	7-01-20-120-239	4.4900	4.49
1.00/EA	HP 131A (CF211A) CYAN TONER	7-01-20-100-239	69.4500	69.45
1.00/EA	HP 131A (CF212A) YELLOW TONER	7-01-20-100-239	69.4500	69.45
1.00/EA	HP 131A (CF213A) MAGENTA TONER	7-01-20-100-239	69.4500	69.45
1.00/EA	HP 131A (CF210A) BLACK TONER	7-01-20-100-239	55.4200	55.42
1.00/PK	BIC WITE-OUT CORRECTION TAPE	7-01-20-120-239	12.4200	12.42
	INVOICE NO. 3360309309 11/25/17			
			TOTAL	474.42

CLAIMANT'S CERTIFICATION & DECLARATION

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X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 5/2/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.
NO. 18-00235

ORDER DATE: 04/18/18
REQUISITION NO:
DELIVERY DATE: 04/18/18
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD	
CHECK NO.	9307
DATE PAID	5-10-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: GRAMC

GRAMCO
1149 BLOOMFIELD AVE.
CLIFTON, NJ 07012-2314

Phone: (973)773-8500 Fax: (973)773-8555

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	LIBERTY DIGITAL RECORDING SYSTEM - HARDWARE/SOFTWARE SUPPORT	8-01-20-120-201	522.5000	522.50
1.00	LIBERTY DIGITAL RECORDING SYSTEM - HARDWARE/SOFTWARE SUPPORT	8-01-21-180-201	522.5000	522.50
	CONTRACT TERM 4/27/18 - 4/26/19			
	OFFER NO. 3088 3/15/18			
			TOTAL	1,045.00

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X Thomas Grazians
VENDOR SIGN HERE

President 4/23/18
OFFICIAL POSITION DATE

22-221-8889
TAX ID NO. OR SOCIAL SECURITY NO.

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.

4/27/18
DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

~~1001~~ East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00259

ORDER DATE: 04/27/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9319

DATE PAID 5-11-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	2018 PLANAMTH MTH WAL 12X27	8-01-21-180-239	9.1300	9.13
2.00/BX	SPLS 5TAB HANG FDR LTR ASST 25	8-01-20-120-239	11.5000	23.00
1.00/PK	REMARX CHISEL ASST 4PK	8-01-20-120-239	4.2900	4.29
1.00/DZ	PEN ROLLER UNIBALL DLX XFN BK	8-01-20-120-239	19.7700	19.77
1.00/PK	SBL INVISIBL TAPE 3/4X1296 6PK	8-01-20-120-239	3.7500	3.75
1.00/EA	LOGITECH M325 BLACK	8-01-20-120-239	19.9500	19.95
1.00/CT	CLEAN ALL GENERAL PURPOSE 4CT	8-01-26-310-212	30.3000	30.30
1.00/CT	TRASHBAG 33X40 31-33GAL XHVY	8-01-26-310-212	24.8400	24.84
1.00/PK	STAPLES13GAL KITCHEN 80CT	8-01-26-310-212	8.4900	8.49
1.00/EA	AVERY 5.5X8.5 EZ VW BINDR BLUE	8-01-20-120-239	7.4900	7.49
1.00/BX	DIVIDER NON-LAM WHITE 5 TAB	8-01-20-130-239	36.4600	36.46
1.00/BX	STAPLES STD SHEET PROT-200CT	8-01-20-120-239	7.5900	7.59
1.00/PK	STAPLES 8-TAB WRITE-ON 4PK	8-01-20-120-239	6.5500	6.55
2.00/EA	RUB WET MOP HEAD 16IN	8-01-26-310-212	2.9500	5.90
1.00/CT	LINER,24X32, .35MIL,BK	8-01-26-310-212	58.9000	58.90
2.00/CT	ANGEL SOFT DISP CS BATH TISSUE	8-01-26-310-212	22.7800	45.56
	INVOICE NO. 3365602148 1/16/18			
1.00/BD	MAGNET HOLD ITS 1 X 10 ROLL	8-01-20-120-239	16.5900	16.59
	INVOICE NO. 3365784379 1/19/18			
			TOTAL	328.56

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 5/2/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00260

ORDER DATE: 04/27/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9319

DATE PAID 5-11-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
4.00/CT	STAPLES 8.5X11 COPY CS INVOICE NO. 3367636750 2/3/18	8-01-20-100-239	37.7600	151.04
1.00/EA	STPL HL8000 LAT 36IN 3DWR PUTY INVOICE NO. 3367636758 2/3/18	8-01-20-120-239	319.6000	319.60
			TOTAL	470.64

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 5/2/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Gale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00261

ORDER DATE: 04/27/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9319
DATE PAID 5-11-18 MY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	LOGITECH K750 SOLAR KEYBOARD	7-01-20-120-239	56.9900	56.99
2.00/EA	2018 AAG QN DLY CAL 3 1/2 X 6	7-01-20-120-239	9.4900	18.98
1.00/EA	2018 - 3 MONTH WALL CALENDAR	7-01-20-120-239	13.3500	13.35
1.00/EA	SATURN 3I 95 9.5IN LAMINATOR	8-01-20-120-239	88.7900	88.79
1.00/PK	FELLOWES 5MIL 60PK LAM POUCHES	7-01-20-120-239	39.9900	39.99
	INVOICE NO. 3362020834 12/9/17			
			TOTAL	218.10

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 5/2/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

~~1001~~ East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00326

ORDER DATE: 05/21/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9363

DATE PAID 6-13-18 MY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	CARDER CHAIR	8-01-20-120-239	189.9900	189.99
4.00/PK	SPLS 3.5IN TABS+INSERTS CLR 2	8-01-20-120-239	2.4500	9.80
1.00/PK	FEBREZE W/GAIN ORIG 2PK 8.8OZ	8-01-20-120-239	5.9900	5.99
1.00/PK	FEBREZE W/GAIN ORIG 2PK 8.8OZ	8-01-20-130-239	5.9900	5.99
2.00/EA	TABLETOP FILE-MESH-BLACK	8-01-20-130-239	16.1700	32.34
	INVOICE NO. 3375862071 4/24/18			
1.00/EA	ACCUSTAMP INK RF 2PK RED/BLUE	8-01-20-120-239	5.9900	5.99
	INVOICE NO. 3375862072 4/24/18			
			TOTAL	250.10

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 6/5/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 ~~East~~ Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00329

ORDER DATE: 05/22/18
REQUISITION NO:
DELIVERY DATE: 05/22/18
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 4927 | 9363
DATE PAID 6-13-18 MV

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
0.50/CT	STAPLES 8.5X11 3HOLE COPY CS (1 ORDERED--SPLIT COST WITH W/S)	8-01-20-140-239	44.0600	22.03
0.50/CT	STAPLES 8.5X11 3HOLE COPY CS (1 ORDERED--SPLIT COST WITH TAX COLLECTOR)	8-09-55-502-239	44.0600	22.03
1.00/EA	HP 81A BLACK LASERJET TONER (1 ORDERED--SPLIT COST WITH W/S)	8-01-20-140-239	83.8900	83.89
1.00/EA	HP 81A BLACK LASERJET TONER (1 ORDERED--SPLIT COST WITH TAX COLLECTOR)	8-09-55-502-239	83.9000	83.90
1.00/PK	STAPLES VNYL PAPER CLIP 1000CT	8-01-20-120-239	4.7100	4.71
1.00/PK	STAPLES JMB VNYL PPR CLP 500CT	8-01-20-120-239	5.3000	5.30
1.00/BX	SPLS 3TAB FF LGL MANILA 100PK	8-01-20-120-239	7.2300	7.23
1.00/EA	SCOTCH SURE STRT TP W LRG DISP	8-01-20-120-239	3.8700	3.87
2.00/DZ	SONIX RET GEL 12PK CHIP BOX BK	8-01-20-120-239	7.9900	15.98
2.00/DZ	STAPLES GEL STICK GRIP BLU 12	8-01-20-120-239	5.7400	11.48
1.00/PK	WRITE BROS. BP MED BLUE 60	8-01-20-120-239	5.2900	5.29
1.00/PK	3TAB FILE FLDR DARK BLUE LBL	8-01-20-120-239	2.7700	2.77
	INVOICE NO. 3374712911 4/10/18			
			TOTAL	268.48

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

C. Greeley 6/5/18

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Hale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00333

ORDER DATE: 05/25/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9391
DATE PAID 6-26-18 MJ

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00/EA	5 STAR 5 SUB NTBK 11X8.5CR 200	8-01-20-120-239	10.2900	20.58
1.00/BX	ENVL COIN 20# 2.25X3.5 KRAFT 5	8-01-20-120-239	38.0900	38.09
1.00/DZ	SHARPIE FINE PERM BLACK 12/DZ	8-01-20-120-239	5.4800	5.48
	INVOICE NO. 3379148160 5/26/18			
1.00/DZ	STAPLES PERF PAD LTR WHT 12	8-01-20-130-239	4.3200	4.32
	INVOICE NO. 3379148165 5/26/18			
			TOTAL	68.47

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 6/12/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00344

ORDER DATE: 05/30/18
REQUISITION NO:
DELIVERY DATE: 05/30/18
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9476

DATE PAID 8/16/18

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	DROP BOX LARGE WHITE	8-01-20-120-239	90.8900	90.89
	INVOICE NO. 3382027749 6/26/18			
2.00/CT	TOWEL MULTIFOLD 01890	8-01-26-310-212	21.2800	42.56
4.00/EA	BATTERY AA INDUSTRIAL	8-01-20-130-239	0.4700	1.88
	INVOICE NO. 3379480294 5/31/18			
			TOTAL	135.33

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 7/24/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00410

ORDER DATE: 06/25/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
N.J. STATE CONTRACT-DEPT NY
PO BOX 415256
BOSTON, MA 02241-5256

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9476

DATE PAID 8/16/18

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
4.00/RM	HAM 8.5X11 COPYPLUS RM	8-01-20-120-239	4.4100	17.64
2.00/BX	LGL 5.25 EXP POCKETS 10PK	8-01-20-120-239	25.0200	50.04
1.00/PK	AVY 1X2 5/8 IJ LBL 25SH	8-01-20-120-239	10.5700	10.57
1.00/PK	AVY INK LBL 10UP 25-2 X 4	8-01-20-120-239	10.5400	10.54
	INVOICE NO. 3381587017 6/21/18			
			TOTAL	88.79

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 7/24/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00454

ORDER DATE: 07/09/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9476

DATE PAID 8/16/18

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	HP87A Laserjet Toner, Black Catalog #: 1847333	8-01-20-120-215	195.1800	195.18
2.00/PK	Febreeze w/Gain, 2pk 8.8 oz Catalog #: 2519626	8-01-20-120-239	4.9500	9.90
1.00/BX	3 tab ltr manilla fldr 100 pk Catalog #: 116657 INVOICE NO. 3383587085 7/10/18	8-01-20-120-239	3.7600	3.76
1.00/BX	Lam pouch ltr 3mil 50pk Catalog #: 677045 INVOICE NO. 3383587086 7/10/18	8-01-20-120-239	4.5000	4.50
			TOTAL	213.34

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

7/26/18

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Susan Schick
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00455

ORDER DATE: 07/10/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP

STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9476

DATE PAID 8/16/18

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/CT	8.5x11 copy paper Catalog #: 135848	8-01-20-100-239	37.7600	37.76
1.00/CT	8.5x11 copy paper Catalog #: 135848	8-01-20-120-239	37.7600	37.76
2.00/RM	8.5x11 copy paper, blue Catalog #: 490947	8-01-20-130-239	5.1200	10.24
	INVOICE NO. 3383639078 7/11/18		TOTAL	85.76

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 7/26/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Susan Schier
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

~~1001~~ East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00539

ORDER DATE: 08/13/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9521
DATE PAID 9-13-18 KY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00/BX	Expanding files 5 1/4" 10/box Catalog #: 418343	8-01-20-120-239	25.0200	50.04
2.00/BT	Ajax dish soap, orange, 280z Catalog #: 666991	8-01-26-310-212	2.9900	5.98
	Invoice #3387091177 8/16/18		TOTAL	56.02

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

ATTACHED

X

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

9/6/18

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Susan Schick
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
~~Alpha~~, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 18-00555

ORDER DATE: 08/21/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

PAYMENT RECORD

CHECK NO. 9521
DATE PAID 9-13-18 MY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
2.00/PK	Magnetic label holder 3x5 10pk Catalog #: TCO29300 INVOICE NO. 3387524197 8/21/18	8-01-20-130-239	27.5900	55.18
1.00/EA	HP131X hg yld blk toner CF210X Catalog #: 954080	8-01-20-120-215	76.1300	76.13
1.00/EA	HP131A yellow toner CF212A Catalog #: 954075	8-01-20-120-215	75.1300	75.13
1.00/EA	HP131A cyan toner CF211A Catalog #: 954076	8-01-20-120-215	75.1300	75.13
1.00/EA	HP131A magenta toner CF213A Catalog #: 954084	8-01-20-120-215	75.1300	75.13
2.00/CT	8.5 x 11 copy paper Catalog #: 135848 INVOICE NO. 3387661209 8/23/18	8-01-20-100-239	38.9500	77.90
			TOTAL	434.60

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED
VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

DEPT. HEAD 9/6/18 DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Yale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO

BOROUGH OF ALPHA

1001 East Blvd
Alpha, NJ 08865
TEL (908)454-0088 FAX (908)454-4210

PURCHASE ORDER
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.
NO. 18-00557

ORDER DATE: 08/22/18
REQUISITION NO:
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD	
CHECK NO.	9521
DATE PAID	9-13-18 MY

NOTICE: TAX ID #22-6001634 - TAX EXEMPT

SHIP TO

BOROUGH OF ALPHA
1001 EAST BLVD
ALPHA, NJ 08865

VENDOR

VENDOR #: STAP
STAPLES BUSINESS ADVANTAGE
PO BOX 70242
PHILADELPHIA, PA 19176-0242

Phone: (800)225-1884 Fax: (800)264-2614

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00/EA	BOARD MARKER ALUMINUM 3X2	8-01-20-120-239	31.2100	31.21
1.00/EA	DRY ERASE ERASER	8-01-20-120-239	0.9300	0.93
2.00/BX	FOLDER HANGING BOX BTTM 3 EXP	8-01-20-130-239	34.8900	69.78
	INVOICE NO. 3387935594 8/25/18			
	ORDER NO. 7203311767-000-001			
2.00/BX	FOLDER HANGING BOX BTTM 3 EXP	8-01-20-130-239	34.8900	69.78
1.00/EA	DRY ERASE ERASER	8-01-20-120-239	0.9300	0.93
1.00/EA	BOARD MARKER ALUMINUM 3X2	8-01-20-120-239	31.2100	31.21
	INVOICE NO. 3387935598 8/25/18			
	ORDER NO. 7203314184-000-001			
			TOTAL	203.84

Please sign below
& return for payment

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under 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.

X ATTACHED

VENDOR SIGN HERE

OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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.

9/6/18

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER.
MAIL VOUCHER & ITEMIZED BILLS TO:

BOROUGH OF ALPHA
1001 East Blvd
Alpha, NJ 08865

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Melissa Hale
FUNDS AVAILABLE

COUNCILPERSON/DIRECTOR

CFO