TOWNSHIP OF WEST DEPTFORD
400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)853-1708

Purchase Order

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

NO. 21-00798

ORDER DATE: 03/15/21
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 2572 Date Paid 4/8/2021

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d)."
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods.
If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL
50.00	50 Body Camera Mounts 11507	1-01-25-0240-0000-03200 POLICE CLOTHING & UNIFORMS	31.3000	1,565.00
				=============
			TOTAL	1,565.00

PLEASE SIGN AND 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.

VENDOR SIGN HERE

AR Asst 4/8/21
OFFICIAL POSITION DATE

86-0741227
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.

4/1
SIGNATURE TITLE DATE

PAYMENT AUTHORIZED
Ordered paid at the Meeting of the Township Committee held:

TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS
I hereby certify that funds are available as encumbered.

Treasurer

Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
AR@axon.com
www.axon.com

Invoice No	SI-1723874
Invoice Date	12-Mar-21
Payment Term	Net 30
Payment Due Date	11-Apr-21
Sales Order	SO210670608
Customer account	466373
Reference	1039027
Customer reference	

BILL TO:

WEST DEPTFORD POLICE DEPT - NJ
ATTN: KEVIN DONAHUE
400 CROWN POINT ROAD
THOROFARE, NJ 08086
USA

SHIP TO:

WEST DEPTFORD POLICE DEPT - NJ
ATTN: KEVIN DONAHUE
400 CROWN POINT ROAD
THOROFARE, NJ 08086
USA

Item number	Description	Quantity	Unit price	[USD]Amount
11507	MOLLE MOUNT, SINGLE, AXON RAPIDLOCK	50	31.30	1,565.00

Please see https://www.axon.com/legal/sales-terms-and-conditions for all sales terms and conditions

Invoice Total		1,565.00
Shipping		0.00
Sales Tax		0.00
Total		1,565.00
Amount Received		0.00
BALANCE DUE	**USD**	**1,565.00**

Continued on next page

WEST DEPTFORD TOWNSHIP
400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)384-3066

Purchase Order

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

NO. **17-02952**

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

ORDER DATE: 09/28/17
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 48646 Date Paid 11 9 17

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods.
If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	BODY CAMERA EQUIPMENT	7-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	32,396.0000	32,396.00
				============
			TOTAL	32,396.00

PLEASE SIGN AND 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.

Kelly Giunt
VENDOR SIGN HERE

AR Assistant 10/16/17
OFFICIAL POSITION DATE

86-0741227
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.

Chief 10/24/17
SIGNATURE TITLE DATE

PAYMENT AUTHORIZED

Ordered paid at the Meeting of the Township Committee held: ____________.

Christine E Greenwood
TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS

I hereby certify that funds are available as encumbered.

Christine Greenwood
Treasurer

AXON

Remit Payment to:
Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
AR@axon.com
www.axon.com

Invoice

Invoice No	SI1489972
Invoice date	6/29/2017
Page	1 of 1
Sales order	SO170314382
Purchase order	YEAR 2 BILLING
Your ref	
Payment	Net 30
Invoice account	466373
Mode of delivery	Customer Pickup
Terms of delivery	FOB Scottsdale

BILL TO:
WEST DEPTFORD POLICE DEPT
PO BOX 89
THOROFARE, NJ 08086
USA

SHIP TO:
WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

Item number	Revision	Description	Ordered	Shipped	Backordered	Unit price	Amount
85124		EVIDENCE.COM UNLIMITED LICENSE YEAR 2 PAYMENT	32.00	32.00	0.00	916.75	29,336.00
87201		BASIC EVIDENCE.COM LICENSE: YEAR 2 PAYMENT	11.00	11.00	0.00	180.00	1,980.00
87026		TASER ASSURANCE PLAN DOCK 2 ANNUAL PAYMENT	5.00	5.00	0.00	216.00	1,080.00
85110		EVIDENCE.COM INCLUDED STORAGE	1,280.00	1,280.00	0.00	0.00	0.00
85110		EVIDENCE.COM INCLUDED STORAGE	110.00	110.00	0.00	0.00	0.00

Please see http://www.axon.com/sales-terms-and-conditions for all sales terms and conditions.

Payment due 07/29/2017

Sales Amount	32,396.00
Misc./Handling	0.00
Shipping Freight & Handling	0.00
Sales tax	0.00
Total	32,396.00
Amount received	0.00
BALANCE DUE	**32,396.00** USD

WEST DEPTFORD TOWNSHIP
400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)384-3066

Purchase Order

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

NO. 17-03103

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

ORDER DATE: 10/16/17
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 48646 Date Paid 11.9.17

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods.
If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	BODY CAMERA EQIPMENT	7-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	1,512.9600	1,512.96
1.00	BODY CAMERA EQIPMENT	7-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	5,616.0000	5,616.00
			TOTAL	7,128.96

PLEASE SIGN AND RETURN FOR PAYMENT

Please fax back to 856-384-3066.

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.

Kelly Turner
VENDOR SIGN HERE
AR Assistant 10/23/17
OFFICIAL POSITION 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.

Chief 10/23/17
SIGNATURE TITLE DATE

PAYMENT AUTHORIZED
Ordered paid at the Meeting of the Township Committee held: ____

Christine E Greenwood
TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS
I hereby certify that funds are available as encumbered.

Christine Greenwood
Treasurer

AXON

Remit Payment to:
Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
ar@axon.com
www.axon.com

Invoice No	SI1499478
Invoice date	9/6/2017
Page	1 of 1
Sales order	SO170326587
Purchase order	Q109128
Your ref	SPARE HARDWARE
Payment	Net 30
Invoice account	466373
Mode of delivery	Fedex - Ground
Terms of delivery	FOB Destination

BILL TO:

WEST DEPTFORD POLICE DEPT
PO BOX 89
THOROFARE, NJ 08086
USA

SHIP TO:

WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

Item number	Revision	Description	Ordered	Shipped	Backordered	Unit price	Amount
70033	-	WALL MOUNT BRACKET, ASSY, EVIDENCE.COM DOCK	2.00	2.00	0.00	0.00	0.00
74008	-	AXON DOCK, 6 BAY + CORE, AXON BODY 2	4.00	4.00	0.00	378.24	1,512.96

Backorders

Item number	Description	Remaining quantity	Unit	Confirmed ship date
74003	CAMERA SYSTEM, AXON DASH	4.00	EA	6/17/2017
74024	BATTERY SYSTEM, AXON FLEET	2.00	EA	6/17/2017
74027	CONNECTOR, RF TRANCEIVER, USB	2.00	EA	6/17/2017
74025	AXON FLEET MOUNT ASSEMBLY	2.00	EA	6/17/2017

MUST SHIP WITH SO170326585

Please see http://www.axon.com/sales-terms-and-conditions for all sales terms and conditions.

Payment due 10/06/2017

Sales Amount	1,512.96
Misc./Handling	0.00
Shipping Freight & Handling	0.00
Sales tax	0.00
Total	1,512.96
Amount received	0.00
BALANCE DUE	**1,512.96** USD

AXON

Remit Payment to:
Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
ar@axon.com
www.axon.com

Invoice

Invoice No	SI1500739
Invoice date	9/15/2017
Page	1 of 1
Sales order	SO170326585
Purchase order	16-01442
Your ref	
Payment	Net 30
Invoice account	466373
Mode of delivery	Fedex - Ground
Terms of delivery	FOB Destination

BILL TO:
WEST DEPTFORD POLICE DEPT
PO BOX 89
THOROFARE, NJ 08086
USA

SHIP TO:
WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

Item number	Revision	Description	Ordered	Shipped	Backordered	Unit price	Amount
85163		UNLIMITED EVIDENCE.COM FLEET: YEAR 1 PAYMENT	12.00	12.00	0.00	468.00	5,616.00
74027	-	Axon Fleet Dongle	12.00	12.00	0.00	0.00	0.00
74003	-	CAMERA SYSTEM, AXON FLEET	24.00	24.00	0.00	0.00	0.00
74025	-	MOUNT ASSEMBLY, AXON FLEET	24.00	24.00	0.00	0.00	0.00
70112	-	AXON SIGNAL UNIT	12.00	12.00	0.00	0.00	0.00
74024	-	BATTERY SYSTEM, AXON FLEET	24.00	24.00	0.00	0.00	0.00
11602	-	PEPWAVE ROUTER	12.00	12.00	0.00	0.00	0.00
74063		STANDARD FLEET INSTALLATION (PER VEHICLE)	12.00	12.00	0.00	0.00	0.00
74110	X1	CABLE, CAT6 ETHERNET 25 FT, FLEET	12.00	12.00	0.00	0.00	0.00

MUST SHIP WITH SO170326587

Please see http://www.axon.com/sales-terms-and-conditions for all sales terms and conditions.

Payment due 10/15/2017

Sales Amount	5,616.00	
Misc./Handling	0.00	
Shipping Freight & Handling	0.00	
Sales tax	0.00	
Total	5,616.00	
Amount received	0.00	
BALANCE DUE	**5,616.00**	**USD**

TOWNSHIP OF WEST DEPTFORD
400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)853-1708

Purchase Order

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

NO. 22-03208

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

10.15

ORDER DATE: 09/21/22
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 6508 Date Paid 10/6/2022

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods. If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	Dynamic Bundle-Bodycam INUS064370	2-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	38,940.0000	38,940.00
			TOTAL	38,940.00

PLEASE SIGN AND 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 Michelle Galat
VENDOR SIGN HERE

AR SPECIALIST 09/30/2022
OFFICIAL POSITION DATE

860741227
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.

[signature]
SIGNATURE TITLE DATE

PAYMENT AUTHORIZED
Ordered paid at the Meeting of the Township Committee held:

[signature]
TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS
I hereby certify that funds are available as encumbered.

[signature]
Treasurer

105

Invoice

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice ID	INUS064370
Date	01-Apr-22
Page	1 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Road
West Deptford, NJ 08086
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Bundled Item Number	Bundled Description	Bundled Quantity	Unit Price	Amount
DynamicBundle	Dynamic Bundle	1.00		38,940.00

Line No.	Ship to*	Item Number	Description	Quantity	Unit Price	Amount
1	1	73461	Evidence.com Unlimited Plus License Annual Payment Tax Date 01-Apr-22	35.00	948.00	
2	1	73403	RESPOND DEVICE LICENSE ANNUAL PAYMENT Tax Date 01-Apr-22	35.00	108.00	
3	1	80014	BASIC EVIDENCE.COM LICENSE: YEAR 3 PAYMENT Tax Date 01-Apr-22	9.00	180.00	
4	1	85110	EVIDENCE.COM INCLUDED STORAGE Tax Date 01-Apr-22	90.00	0.00	
5	1	80024	PRO EVIDENCE.COM LICENSE: YEAR 3 PAYMENT Tax Date 01-Apr-22	2.00	180.00	
6	1	85110	EVIDENCE.COM INCLUDED STORAGE Tax Date 01-Apr-22	60.00	0.00	

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail To:	For Overnight Check Payments Mail
Account Name: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 122100024 Reference No: INUS064370	Beneficiary: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 021000021 SWIFT Code: CHASUS33 Reference No: INUS064370	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS064370	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS064370

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire

Invoice

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice ID	INUS064370
Date	01-Apr-22
Page	2 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Road
West Deptford, NJ 08086
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Sales Amount		38,940.00
Misc. Charges		0.00
Discount		0.00
Sales Tax		0.00
Total		38,940.00
Amount Received		0.00
BALANCE DUE	**USD**	**38,940.00**

Payment Due **01-May-22**

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	**For Wire Transfers**	**For Check Payments Mail To:**	**For Overnight Check Payments Mail**
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No INUS064370	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No INUS064370	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS064370	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS064370

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice

Invoice ID	INUS064370
Date	01-Apr-22
Page	3 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Road
West Deptford, NJ 08086
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

***Tax Note**

Ship-to-address Legend*

1 Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail To:	For Overnight Check Payments Mail
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No INUS064370	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No INUS064370	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS064370	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS064370

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire

TOWNSHIP OF WEST DEPTFORD

400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)853-1708

Purchase Order

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

NO. **23-01607**

ORDER DATE: 05/04/23
DELIVERY DATE: 05/04/23
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE#:
VENDOR FAX#:

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

VENDOR Vendor#: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 8306 Date Paid 6/22/2023

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" Information and labels must be included with goods,
If not, this must be stated with the packing slip,

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT-TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	Dynamic Bundle-Bodycam	3-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	38,940.0000	38,940.00
			TOTAL	38,940.00

PLEASE SIGN AND 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,

Michelle Galat

VENDOR SIGN HERE

AR SPECIALIST 05/16/2023

OFFICIAL POSITION DATE

860741227

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,

SIGNATURE TITLE DATE

PAYMENT AUTHORIZED

Ordered paid at the Meeting of the Township Committee held:

TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS

I hereby certify that funds are available as encumbered.

Treasurer

Invoice

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice ID	INUS148886
Date	01-Apr-23
Page	1 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Line No.	Ship to*	Item Number	Description	Quantity	Unit Price	Amount
1	1	73461	Evidence.com Unlimited Plus License Annual Payment Tax Date 01-Apr-23	35.00	948.00	33,180.00
2	1	85110	EVIDENCE.COM INCLUDED STORAGE Tax Date 01-Apr-23	60.00	0.00	0.00
3	1	80025	PRO EVIDENCE.COM LICENSE: YEAR 4 PAYMENT Tax Date 01-Apr-23	2.00	180.00	360.00
4	1	85110	EVIDENCE.COM INCLUDED STORAGE Tax Date 01-Apr-23	90.00	0.00	0.00
5	1	80015	BASIC EVIDENCE.COM LICENSE: YEAR 4 PAYMENT Tax Date 01-Apr-23	9.00	180.00	1,620.00
6	1	73403	RESPOND DEVICE LICENSE ANNUAL PAYMENT Tax Date 01-Apr-23	35.00	108.00	3,780.00

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail To:	For Overnight Check Payments Mail
Account Name: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 122100024 Reference No: INUS148886	Beneficiary: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 021000021 SWIFT Code: CHASUS33 Reference No: INUS148886	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS148886	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 2108 E Elliot Rd, Tempe, AZ 85283 Reference No INUS148886

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire

Invoice

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice ID	INUS148886
Date	01-Apr-23
Page	2 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Sales Amount		38,940.00
Misc. Charges		0.00
Discount		0.00
Sales Tax		0.00
Total		38,940.00
Amount Received		0.00
BALANCE DUE	**USD**	**38,940.00**

Payment Due **01-May-23**

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail To:	For Overnight Check Payments Mail
Account Name: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 122100024 Reference No: INUS148886	Beneficiary: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 021000021 SWIFT Code: CHASUS33 Reference No: INUS148886	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS148886	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 2108 E Elliot Rd, Tempe, AZ 85283 Reference No INUS148886

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Invoice

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PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
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TIN: 86-0741227
DUNS Number: 832176382
UEI Number: TBW7MGPYURM7

Invoice ID	INUS148886
Date	01-Apr-23
Page	3 of 3
Sales Order	
Requisition	
Your Ref	
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

***Tax Note**

Ship-to-address Legend*

1 Business;Delivery;Invoice-400 Crown Point Rd
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail To:	For Overnight Check Payments Mail
Account Name: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 122100024 Reference No: INUS148886	Beneficiary: Axon Enterprise, Inc. Account Number: 634912729 Bank Routing No: 021000021 SWIFT Code: CHASUS33 Reference No: INUS148886	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS148886	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 2108 E Elliot Rd, Tempe, AZ 85283 Reference No INUS148886

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire

400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)384-3066

Purchase Order

[illegible]

NO. 20-01944

ORDER DATE: 07/21/20
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

8/19

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 1139 Date Paid 8/20/2020

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods.
If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT	UNIT COST	TOTAL
1.00	Bodycam,evidence.com contract	0-01-25-0240-0000-02600 POLICE MAINT. OF OTHER EQUIP	19,550.7000	19,550.70
			TOTAL	19,550.70

PLEASE SIGN AND RETURN FOR PAYMENT

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.

Jennifer Cottenfiar
VENDOR SIGN HERE

AR Specialist 7/28/20
OFFICIAL POSITION DATE

86-0741227

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 TITLE DATE

PAYMENT AUTHORIZED
Ordered paid at the Meeting of the Township Committee held:

TREASURER

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS
I hereby certify that funds are available as encumbered.

Treasurer

170

Invoice

Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
AR@axon.com
www.axon.com

PLEASE START P.O
#2600

Invoice No	SI-1645557
Invoice Date	04-Mar-20
Payment Term	Net 30
Payment Due Date	03-Apr-20
Sales Order	SO200537654
Customer account	466373
Purchase Order	Q237136
Customer reference	

BILL TO:

WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

SHIP TO:

WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

Item number	Description	Quantity	Unit price	[USD]Amount
11534	USB-C to USB-A CABLE FOR AB3 OR FLEX 2	3	0.00	0.00
11534	USB-C to USB-A CABLE FOR AB3 OR FLEX 2	3	0.00	0.00
11534	USB-C to USB-A CABLE FOR AB3 OR FLEX 2	32	0.00	0.00
70033	WALL MOUNT BRACKET, ASSY, EVIDENCE.COM DOCK	5	0.00	0.00
71019	NORTH AMER POWER CORD FOR AB3 8-BAY, AB2 1-BAY / 6-BAY DOCK	5	0.00	0.00
73202	AXON BODY 3 - NA10	3	0.00	0.00
73202	AXON BODY 3 - NA10	3	0.00	0.00
73202	AXON BODY 3 - NA10	32	0.00	0.00
73253	5 Year Technology Assurance Plan Warranty AB3 Camera	3	0.00	0.00
73253	5 Year Technology Assurance Plan Warranty AB3 Camera	3	0.00	0.00
73253	5 Year Technology Assurance Plan Warranty AB3 Camera	32	0.00	0.00
73255	5 Year Technology Assurance Plan Warranty AB3 Dock 8 Bay	5	0.00	0.00
73403	Aware Annual Payment	35	108.00	3,780.00
73460	EVIDENCE.COM UNLIMITED PLUS DOCK TAP: 5 YEAR	35	0.00	0.00
73461	Evidence.com Unlimited Plus License Annual Payment	35	394.02	13,790.70
73652	AWARE A/V SERVICE LINE: 5 YEAR	35	0.00	0.00
74020	MAGNET MOUNT, FLEXIBLE, AXON RAPIDLOCK	3	0.00	0.00
74020	MAGNET MOUNT, FLEXIBLE, AXON RAPIDLOCK	3	0.00	0.00
74020	MAGNET MOUNT, FLEXIBLE, AXON RAPIDLOCK	32	0.00	0.00
74028	WING CLIP MOUNT, AXON RAPIDLOCK	3	0.00	0.00
74028	WING CLIP MOUNT, AXON RAPIDLOCK	3	0.00	0.00
74028	WING CLIP MOUNT, AXON RAPIDLOCK	32	0.00	0.00
74210	AXON BODY 3 - 8 BAY DOCK	5	0.00	0.00
80012	BASIC EVIDENCE.COM LICENSE: YEAR 1 PAYMENT	9	180.00	1,620.00
80022	PRO EVIDENCE.COM LICENSE: YEAR 1 PAYMENT	2	180.00	360.00
85110	EVIDENCE.COM INCLUDED STORAGE	60	0.00	0.00
85110	EVIDENCE.COM INCLUDED STORAGE	90	0.00	0.00
85114	EVIDENCE.COM INCLUDED STORAGE (GB)-5 YEAR CONTRACT	140	0.00	0.00

Please see https://www.axon.com/legal/sales-terms-and-conditions for all sales terms and conditions

Invoice Total		19,550.70
Shipping		0.00
Sales Tax		0.00
Total		19,550.70
Amount Received		0.00
BALANCE DUE	**USD**	**19,550.70**

Continued on next page

Invoice

Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: (480) 991-0797
Fax: (480) 991-0791
AR@axon.com
www.axon.com

Invoice No	SI-1645557
Invoice Date	04-Mar-20
Payment Term	Net 30
Payment Due Date	03-Apr-20
Sales Order	SO200537654
Customer account	466373
Purchase Order	Q237136
Customer reference	

RETURN THIS PORTION WITH YOUR PAYMENT

WEST DEPTFORD POLICE DEPT
400 CROWN POINT RD
THOROFARE, NJ 08086
USA

BALANCE DUE	19,550.70
Currency	USD

For ACH Payments:(Preferred Method)	
Account Name	Axon Enterprise, Inc.
Account Number	634912729
Bank Routing/Transit	122100024
Reference Number	SI-1645557

For Wire Transfers:	
Beneficiary	Axon Enterprise, Inc.
Account Number	634912729
Bank Routing/Transit	021000021
SWIFT Code	CHASUS33
Reference Number	SI-1645557

For Lockbox Payments Mail To:
Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Reference Number SI-1645557

Please reference the invoice number on your ACH, Wire or Check payment

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire transfer

The rest of this page is intentionally left blank

End

TOWNSHIP OF WEST DEPTFORD
400 CROWN POINT RD.
WEST DEPTFORD, NJ 08086
Phone: (856)845-4004
Fax: (856)853-1708

Purchase Order

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

NO. 21-01975

SHIP TO

West Deptford Municipal Bldg.
400 Crown Point Road
West Deptford, NJ 08086

ORDER DATE: 06/30/21
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #:
VENDOR FAX #:

VENDOR Vendor #: AXONE005

AXON ENTERPRISE, INC
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AR 85038-9661

PAYMENT RECORD

Check No. 1639 Date Paid 9/16/2021

Please supply a copy of your NJ Business Registration Certificate NJSA 52:32-44(d).
When applicable all "NJ RIGHT TO KNOW" information and labels must be included with goods.
If not, this must be stated with the packing slip.

Bills are approved at the township committee meeting on the first and third Wednesday of each month and must be rendered no later than the Thursday preceding the meeting.

NOTICE: TAX EXEMPT - TAX ID: 21-6001348

QUANTITY	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL
4.00	AXON BODY 3 - NA10	G-02-41-0740-2021-29900 POLICE BODY CAMERAS	699.0000	~~2,796.00~~ 2359.12
1.00	BASIC LICENSE PAYMENT	G-02-41-0740-2021-29900 POLICE BODY CAMERAS	180.00 ~~120.0000~~	180.00 ~~120.00~~ 556.87
			TOTAL	~~2,916.00~~ ~~$2976.00~~ $2915.99

PLEASE SIGN AND RETURN FOR PAYMENT

CLAIMANT 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.

VENDOR SIGN HERE

AR Clerk 8/4/21
OFFICIAL POSITION DATE

86-0741227
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.

9/1
SIGNATURE TITLE DATE

PAYMENT AUTHORIZED
Ordered paid at the Meeting of the Township Committee held:

TREASURER

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

CERTIFICATION OF FUNDS
I hereby certify that funds are available as encumbered.

Treasurer

Q-301453-44356.628RE

Issued: 06/09/2021

Quote Expiration: 07/15/2021

Account Number: 466373

Payment Terms: Net 30
Delivery Method: Fedex - Ground
Contract Number: 00025315

Axon Enterprise, Inc.
17800 N 85th St.
Arizona 85255
United States
Phone: (800) 978-2737

SALES REPRESENTATIVE
Raleigh Edwards
Phone: 4809052067
Email: redwards@axon.com
Fax:

SHIP TO
Grant Worrell
West Deptford Police Dept - NJ
400 Crown Point Road
P.O. Box 89
THOROFARE, NJ 08086
US

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Road
THOROFARE, NJ 08086
US

PRIMARY CONTACT
Grant Worrell
Phone: 8568534599
Email: gworrell@westdeptfordpd.com

Year 1

Item	Description	Term (Months)	Quantity	List Unit Price	Net Unit Price	Total (USD)
Axon Plans & Packages						
73683	10 GB EVIDENCE.COM A-LA-CART STORAGE	44	1	0.00	0.00	0.00
73840	EVIDENCE.COM BASIC ACCESS LICENSE	44	1	0.00	0.00	0.00
Hardware						
73202	AXON BODY 3 - NA10		4	699.00	699.00	2,796.00
74028	WING CLIP MOUNT, AXON RAPIDLOCK		4	0.00	0.00	0.00
11534	USB-C to USB-A CABLE FOR AB3 OR FLEX 2		4	0.00	0.00	0.00
Other						
73841	EVIDENCE.COM BASIC LICENSE PAYMENT	8	1	120.00	120.00	120.00
					Subtotal	2,916.00
					Estimated Shipping	0.00
					Estimated Tax	0.00
					Total	2,916.00

Protect Life.

Year 2

Item	Description	Term (Months)	Quantity	List Unit Price	Net Unit Price	Total (USD)
Other						
73841	EVIDENCE.COM BASIC LICENSE PAYMENT	12	1	180.00	180.00	180.00
					Subtotal	180.00
					Estimated Tax	0.00
					Total	180.00

Year 3

Item	Description	Term (Months)	Quantity	List Unit Price	Net Unit Price	Total (USD)
Other						
73841	EVIDENCE.COM BASIC LICENSE PAYMENT	12	1	180.00	180.00	180.00
					Subtotal	180.00
					Estimated Tax	0.00
					Total	180.00

Year 4

Item	Description	Term (Months)	Quantity	List Unit Price	Net Unit Price	Total (USD)
Other						
73841	EVIDENCE.COM BASIC LICENSE PAYMENT	12	1	180.00	180.00	180.00
					Subtotal	180.00
					Estimated Tax	0.00
					Total	180.00

Grand Total	**3,456.00**

AXON

Summary of Payments

Payment	Amount (USD)
Year 1	2,916.00
Year 2	180.00
Year 3	180.00
Year 4	180.00
Grand Total	**3,456.00**

Notes

This quote is co-termed with quote Q-237136 (executed contract #00025315).

Tax is subject to change at order processing with valid exemption.

Axon's Sales Terms and Conditions

This Quote is limited to and conditional upon your acceptance of the provisions set forth herein and Axon's Master Services and Purchasing Agreement (posted at www.axon.com/legal/sales-terms-and-conditions) **and the Axon Customer Experience Improvement Program Appendix, which includes the sharing of de-identified segments of Agency Content with Axon to develop new products and improve your product experience** (posted at www.axon.com/legal/sales-terms-and-conditions), as well as the attached Statement of Work (SOW) for Axon Fleet and/or Axon Interview Room purchase, if applicable. **The Axon Customer Experience Improvement Program Appendix ONLY applies to Customers in the USA.** In the event you and Axon have entered into a prior agreement to govern all future purchases, that agreement shall govern to the extent it contemplates the products and services being purchased and does not conflict with the Axon Customer Experience Improvement Program Appendix. Any purchase order issued in response to this Quote is subject solely to the above referenced terms and conditions. By signing below, you represent that you are lawfully able to enter into contracts. If you are signing on behalf of an entity (including but not limited to the company, municipality, or government agency for whom you work), you represent to Axon that you have legal authority to bind that entity. If you do not have this authority, please do not sign this Quote.

Signature: 4117 **Date:** 6/29/2021

Name (Print): JOHN CHAMBERS **Title:** CHIEF OF POLICE

PO# (Or write N/A):

Please sign and email to Raleigh Edwards at redwards@axon.com or fax to

Thank you for being a valued Axon customer. For your convenience on your next order, please check out our online store buy.axon.com

The trademarks referenced above are the property of their respective owners.

Axon Internal Use Only		
		SFDC Contract#: Order Type: RMA#: Address Used: SO#:
Review 1	Review 2	
Comments:		

Protect Life.

Invoice copy

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227

Invoice ID	INUS004901
Date	01-Aug-21
Page	1 of 2
Sales Order	
Requisition	
Your Ref	21-01975
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Line No.	Ship to*	Quote No.	Item number	Bundled Description	Quantity	Unit Price	Amount
	1			Basic License Bundle	1.00	180.00	180.00
	1			AB3 Camera Bundle	1.00	2,796.00	2,796.00

Sales Amount		2,976.00
Misc. Charges		0.00
Discount		0.00
Sales Tax		0.00
Total		2,976.00
Amount Received		0.00
BALANCE DUE	**USD**	**2,976.00**

Payment Due 31-Aug-21

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	**For Wire Transfers**	**For Check Payments Mail**	**For Overnight Check Payments Mail**
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No INUS004901	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No INUS004901	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS004901	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS004901

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire transfer

Invoice copy

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227

Invoice ID	INUS004901
Date	01-Aug-21
Page	2 of 2
Sales Order	
Requisition	
Your Ref	21-01975
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

***Tax Note**

Ship-to-address Legend* 1 400 Crown Point Road
West Deptford, NJ 08086
USA

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail	For Overnight Check Payments Mail
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No INUS004901	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No INUS004901	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS004901	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS004901

Please reference the invoice number on your ACH,.Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire transfer

Credit note copy

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227

Invoice ID	CNUS000124
Date	09-Aug-21
Page	1 of 2
Sales Order	
Requisition	
Your Ref	21-01975
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

Line No.	Ship to*	Quote No.	Item number	Bundled Description	Quantity	Unit Price	Amount
	1				1.00	-2,976.00	-2,976.00

Sales Amount		-2,976.00
Misc. Charges		0.00
Discount		0.00
Sales Tax		0.00
Total		-2,976.00
Amount Received		0.00
BALANCE DUE	**USD**	**-2,976.00**

Payment Due **08-Sep-21**

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail	For Overnight Check Payments Mail
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No CNUS000124	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No CNUS000124	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No CNUS000124	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No CNUS000124

Please reference the invoice number on your ACH, Wire or Check payment and send to AR@axon.com

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire transfer

Credit note copy

Axon Enterprise Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Ph: 1-480-991-0797, option 5, option 1
arinquiries@axon.com
www.axon.com
TIN: 86-0741227

Invoice ID	CNUS000124
Date	09-Aug-21
Page	2 of 2
Sales Order	
Requisition	
Your Ref	21-01975
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

BILL TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

SHIP TO
West Deptford Police Dept - NJ
400 Crown Point Rd
West Deptford, NJ 08086-2124
USA

***Tax Note**

Ship-to-address Legend* 1 400 Crown Point Road
West Deptford, NJ 08086
USA

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TIN: 86-0741227

Invoice ID	INUS007447
Date	10-Aug-21
Page	1 of 2
Sales Order	
Requisition	
Your Ref	21-01975
Our Ref	
Payment	Net 30 days
Invoice Account	466373
Terms of Delivery	FCA

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West Deptford, NJ 08086-2124
USA

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USA

Line No.	Ship to*	Quote No.	Item number	Bundled Description	Quantity	Unit Price	Amount
	1			Basic License Bundle	1.00	556.87	556.87
	1			AB3 Camera Bundle	1.00	2,359.12	2,359.12

Sales Amount		2,915.99
Misc. Charges		0.00
Discount		0.00
Sales Tax		0.00
Total		2,915.99
Amount Received		0.00
BALANCE DUE	**USD**	**2,915.99**

Payment Due **09-Sep-21**

PAYMENT REMITTANCE INFORMATION

For ACH/EFT Payment: (Preferred Method)	For Wire Transfers	For Check Payments Mail	For Overnight Check Payments Mail
Account Name Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 122100024 Reference No INUS007447	Beneficiary Axon Enterprise, Inc. Account Number 634912729 Bank Routing No 021000021 SWIFT Code CHASUS33 Reference No INUS007447	Axon Enterprise, Inc. PO BOX 29661 DEPARTMENT 2018 PHOENIX, AZ 85038-9661 Reference No INUS007447	Axon Enterprise, Inc. JPMorgan Chase (AZ1-2170) Attn: Axon Enterprises 29661-2018 1820 E Sky Harbor Circle South, Phoenix AZ 85034 Reference No INUS007447

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