



TOWNSHIP OF NORTH BERGEN
4233 KENNEDY BOULEVARD
NORTH BERGEN, NJ 07047
Phone: (201)392-2000

Purchase Order

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

NO. 20-02385-06

ORDER DATE: 04/20/20

DELIVERY DATE: 06/23/20

REQUISITION #: R0-03337

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

DELIVER TO

PURCHASING DEPT.-ROOM#211
TOWNSHIP OF NORTH BERGEN
4233 KENNEDY BLVD.
NORTH BERGEN NJ 07047

VENDOR

Vendor #: VISIO020

VISION IMPEX INC.
2037 LEMOINE AVE
#340
FORT LEE, NJ 07024

PAYMENT RECORD

CHECK NO. 21102

DATE PAID 9/23/20

NOTICE: TAX EXEMPT - TAX ID: 22-6002151

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
60.00/CSE	NITRILE GLOVES SMARTGUARD - POWDER FREE NITRILE EXAM GLOVES SIZE SMALL, 250 GLOVES PER DISPENSER, 2500 GLOVES PER CASE ITEM# SG311	T-20-56-293-000-0046 STORM RECOVERY TRUST	14.4250	865.50
10.00/CSE	NITRILE GLOVES SMARTGUARD POWDER FREE NITRILE EXAM GLOVES SIZE MEDIUM, 250 GLOVES PER DISPENSER, 2500 GLOVES PER CASE ITEM# SG312	T-20-56-293-000-0046 STORM RECOVERY TRUST	14.4250	144.25
20.00/CSE	NITRILE GLOVES - MEDIUM POWDER FREE, 100 GLOVES PER DISPENSER	T-20-56-293-000-0046 STORM RECOVERY TRUST	10.4450	208.90
1.00/EA	NITRILE GLOVES SMALL NITRILE GLOVES POWDER FREE, 100 GLOVES PER DISPENSER. ITEM# NIPFT102 \$10.445 X 10 BOXES = \$104.45	T-20-56-293-000-0046 STORM RECOVERY TRUST	626.7000	626.70
	STARMED PLUS NITRILE EXAM GLOVES POWDER FREE 300 GLOVES PER DISPENSER, SIZE SMALL. ITEM# SMNP302 \$31.335 X 10 BOXES = \$313.35			

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 Signature

VENDOR SIGN HERE

Purchasing Dept- DATE

APPROVED FOR PURCHASE

Suzanne Taylor 9/21/20
SUZANNE TAYLOR, QPA DATE

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

TOWNSHIP OF NORTH BERGEN
4233 KENNEDY BOULEVARD
NORTH BERGEN, NJ 07047

OFFICER'S CERTIFICATION

I do hereby certify that there are sufficient funds available in the accounts of the Township to enable the commissioners to authorize the entering into this contract between the Township of North Bergen and the above vendor. By this certification, I have encumbered the above named accounts for the amount of the contract pending action by the Board of Commissioners.

Kevin 9/29/20
SIGNATURE DATE

Having knowledge of the facts in the course of regular procedures, I certify that the materials and supplies have been received or the services rendered; said certification is based on delivery slips acknowledged by a municipal official or employee or other reasonable procedures.

Marilyn Dyer 10/5/2020
SIGNATURE DATE

The Township and the Vendor agree that this Purchase Order & Voucher may be executed electronically and in counterparts, each of which shall be deemed a duplicate original, but all of which together shall constitute one and the same instrument so long as it is signed by all parties



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QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
	SUNF203 SEMPERSURE NITRILE POWDER FREE, SIZE MEDIUM, 200 GLOVES PER DISPENSER, ITEM# X-MISC \$20.89 X 10 BOXES = \$626.70 GLOVES FOR EMS, PD AND OTHER TOWNSHIP DEPARTMENTS EMERGENCY SUPPLIES CORONAVIRUS			
			TOTAL	=====
				1,845.35

Vision ImpEx, Inc.

2037 Lemoine Ave. # 340

Fort Lee, NJ 07024

Tel: (201) 313-5670

Fax: (201) 313-7233

INVOICE

Date	Invoice #
8/25/2020	17294

Bill To
Township of North Bergen 4233 Kennedy Blvd. Room # 211 North Bergen, NJ 07047 Attn: Accounts Payable

Ship To
Township of North Bergen 4233 Kennedy Blvd. Room # 211 North Bergen, NJ 07047 Attn: Purchasing Dept.

P.O. No.	Terms	Rep	Ship Date	Ship Via	FOB	Source
waiting on	Net 30	ZB	8/25/2020	Zoran	NJ	Suzanne Taylor
Item	Description			Qty	Rate	Amount
NIPFT103	Medium Nitrile Exam Gloves Powder-Free 100 Gloves per Dispenser			20	10.445	208.90

Thank you for your business.

Subtotal \$208.90**Sales Tax (0.00)** \$0.00**Total** \$208.90**Payments/Credits** \$0.00**Balance Due** \$208.90

Vision ImpEx, Inc.

2037 Lemoine Ave. # 340

Fort Lee, NJ 07024

Tel: (201) 313-5670

Fax: (201) 313-7233

INVOICE

Date	Invoice #
8/25/2020	17295

Bill To
Township of North Bergen 4233 Kennedy Blvd. Room # 211 North Bergen, NJ 07047 Attn: Accounts Payable

Ship To
Township of North Bergen 4233 Kennedy Blvd. Room # 211 North Bergen, NJ 07047 Attn: David Prina

P.O. No.	Terms	Rep	Ship Date	Ship Via	FOB	Source
waiting on	Net 30	ZB	8/25/2020	Zoran	NJ	David Prina
Item	Description	Qty	Rate	Amount		
NIPFT102	SMALL Nitrile Exam Gloves Powder-Free 100 Gloves per Dispenser	10	10.445	104.45		
SMNP302	StarMed Plus Nitrile Exam Gloves Powder Free 300 Gloves per dispenser Size Small *****SEE NOTE BELOW*****	10	31.335	313.35		
X- MISC.	SUNF203 SEMPERSURE NITRILE POWDER FREE MEDIUM 200 Gloves per Dispenser *****SEE NOTE BELOW***** *****BACKORDER***** 17 Cases Large	10	20.89	208.90		

Thank you for your business.

Subtotal**Sales Tax (0.00)****Total****Payments/Credits****Balance Due**

Vision ImpEx, Inc.

2037 Lemoine Ave. # 340

Fort Lee, NJ 07024

Tel: (201) 313-5670

Fax: (201) 313-7233

INVOICE

Date	Invoice #
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Ship To
Township of North Bergen 4233 Kennedy Blvd. Room # 211 North Bergen, NJ 07047 Attn: David Prina

P.O. No.	Terms	Rep	Ship Date	Ship Via	FOB	Source
waiting on	Net 30	ZB	8/25/2020	Zoran	NJ	David Prina
Item	Description			Qty	Rate	Amount
	*****IMPORTANT NOTE***** TTNF20X and SUNF20X series Contain 200 gloves per Dispenser, 10 Dispensers per case 2000 gloves per Case. Equivalent to 2 Cases of NIPFT10X series 100 gloves per Dispenser, 10 Dispenser per case 1000 gloves per case SMNP30X series Contain 300 gloves per Dispenser, 10 Dispensers per case 3000 gloves per Case. Equivalent to 3 Cases of NIPFT10X series 100 gloves per Dispenser, 10 Dispenser per case 1000 gloves per case					

Thank you for your business.

Subtotal \$626.70**Sales Tax (0.00)** \$0.00**Total** \$626.70**Payments/Credits** \$0.00**Balance Due** \$626.70

TOWNSHIP OF NORTH BERGEN

RETAIN FOR YOUR RECORDS

NO. 21102

DESCRIPTION			AMOUNT
PO: 20-02385 DESC: EMRGNCY SUPPLIES CORONAVIRUS			1,845.35
INV: 17172	AMT:	865.50	
INV: 17247	AMT:	144.25	
INV: 17294	AMT:	208.90	
INV: 17295	AMT:	626.70	
			
VENDOR			CHECK DATE
VISION IMPEX INC.			09/23/20
			CHECK AMOUNT
			1,845.35