TOWNSHIP OF CRANFORD

WWW.CRANFORDNJ.ORG
8 SPRINGFIELD AVE
CRANFORD, NJ 07016

PURCHASE ORDER

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

NO. 24-00263-10

ORDER DATE: 01/23/24
REQUISITION NO:
DELIVERY DATE: 12/30/24
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX ID #22-6001739 - TAX EXEMPT

SHIP TO

Fire Department
7 Springfield Avenue
Cranford, NJ 07016
T:908-709-7360 F:908-276-6183

VENDOR

VENDOR #: SURVIV

Survivor Fire & Security
Survivor Fire & Safety Equip
39A Myrtle St.
Cranford, NJ 07016

Phone: (908)272-0066 Fax: (908)272-8144

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
3.00	Annual Fire Ext Insp	4-01-25-266-145-280 Uniform Fire Code	10.0000	30.00
1.00	15Lb CO2 Recharge	4-01-25-266-145-280 Uniform Fire Code	35.0000	35.00
2.00	20Lb ABC Recharge	4-01-25-266-145-280 Uniform Fire Code	55.0000	110.00
2.00	Dry Chem Extinguisher Parts	4-01-25-266-145-280 Uniform Fire Code	22.0000	44.00
			TOTAL	219.00

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

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:

TOWNSHIP OF CRANFORD
WWW.CRANFORDNJ.ORG
8 SPRINGFIELD AVE
CRANFORD, NJ 07016

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Chief Financial Officer

INVOICE

Pye Barker Fire & Safety
DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD, NJ 07016-3471
9082720066
pyebarkerfire.com

Customer PO:	Order No:	Invoice No:	Due Date:
Need PO	ST00370786	IV00370767	01/30/2025
Invoice Date:	**Terms:**	**Invoice Total:**	**Amount Due:**
12/16/2024	Internal 45	219.00	219.00

24.00263

License: NJDFS#P01672

BILL TO:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

WORKSITE:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

Authorized By:	Job Number:	Service Location:	Bill To ID:	Worksite ID:	Technician:
Matt Lubin	SER0000022098	Cranford, NJ	69384	69384	

Item	Description	Qty	Unit Price	Total	Tax
IA	Annual Fire Ext Insp	3	10.00	30.00	0.00
RCCO215	15Lb CO2 Recharge	1	35.00	35.00	0.00
RCABC20	20Lb ABC Recharge	2	55.00	110.00	0.00
DRY_CHEM_EXT_PARTS	Dry Chem Extinguisher Parts	2	22.00	44.00	0.00
	Work Notes: Invoice #IV00370763 has been credited via credit invoice #IV00370766 and the new rebill invoice is #IV00370767. The credit has been applied to the original invoice #IV00370763.				

Save time and stamps by going paperless. View, print, and pay your invoices online at **https://customer.pyebarkerfire.com/**

Remit To Address:
Pye-Barker Fire & Safety, LLC
DBA: Survivor Fire & Safety
PO BOX 735358
Dallas, TX 75373-5358

PAY NOW:

Use the token below to create your account

f8ubDIBEjak=
https://customer.pyebarkerfire.com

Subtotal	219.00
Tax	0.00
Freight	0.00
Total	219.00