



**PLAINFIELD MUNICIPAL UTILITIES AUTHORITY**

127 ROOSEVELT AVENUE • P.O. BOX 5110  
 PLAINFIELD, N.J. 07061-5110  
 TEL (908) 226-2518 • FAX (908) 226-2561

**PURCHASE ORDER**

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

No. 10-00459

ORDER DATE: 04/05/10  
 REQUISITION NO:  
 DELIVERY DATE:  
 STATE CONTRACT NO:  
 F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER PROVISIONS OF  
 N.J. SALES & USE TAX ACT (CHAPTER 30, LAW OF 1966).

CHECK NO. \_\_\_\_\_  
 CHECK DATE \_\_\_\_\_

Pg. **S H I P T O**  
**V E N D O R**

P.M.U.A.  
 127 ROOSEVELT AVE.  
 PLAINFIELD, NJ 07060

VENDOR #PER05  
 PUBLIC EMPLOYEE'S RETIREMENT  
 STATE OF NJ DIV. OF PENSION  
 PO BOX 295  
 TRENTON NJ 08625-0295

QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	PUBLIC EMPLOYEE'S RETIREMENT	0-07-10-200-220	8,502.5000	8,502.50
1.00	SYSTEM (PERS)	0-09-10-200-220	8,502.5000	8,502.50
PAYMENT FOR EARNED PENSION "NOT PAID" FROM 1995 TO 1997 PERS ACCOUNT FOR: DAVID W. ERVIN				
			TOTAL	17,005.00

**VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT**

<b>VENDOR'S CERTIFICATION &amp; DECLARATION</b> I do solemnly declare and certify under the penalties of the law that the within bill is correct in 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.	<b>DEPARTMENT CERTIFICATION</b> 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.	<b>VENDOR: DO NOT ACCEPT THIS ORDER UNLESS SIGNED BY PURCHASING AGENT AND CHIEF FINANCIAL OFFICER</b> REQUISITION APPROVAL  DEPARTMENT HEAD DATE
	CLAIMANT DATE	
<b>NOTICE TO VENDOR OR CONTRACTOR</b> ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURES. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT. INVOICE MUST BE FOWARDED TO ORIGINATING DEPARTMENT WITH SIGNED VOUCHER.	<b>PAYMENT APPROVAL</b>  SIGNATURE DATE	PURCHASE ORDER APPROVAL  PURCHASING AGENT DATE
		<b>CERTIFICATION OF FUNDS</b>  CHIEF FINANCIAL OFFICER DATE

VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT

**PLAINFIELD MUNICIPAL  
UTILITIES AUTHORITY**

APPROVALS:

**Purchase Requisition**

Date: 4/11/10

Dept. Name: ADMIN.  
 Originator Authorization: [Signature]

POSITION  
NUMBER

VENDOR NO.: \_\_\_\_\_

VENDOR NAME: PERS - State of New Jersey  
 ADDRESS: For Account of David W. Ervin

Dept. Authorization: [Signature]  
 Finance Authorization: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Purchasing Agent Authorization

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ZIP: \_\_\_\_\_

BRC ON FILE: YES \_\_\_ NO \_\_\_

ACCOUNT CODE: ADMIN. - PERS - S + S W

SHIPPING INSTRUCTIONS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

SPECIAL INSTRUCTIONS: P.O. # 10-00459

ITEM	QTY	UNIT	ACCOUNT	DESCRIPTION	AMOUNT
				For Benefit of PERS Account of David W. Ervin	\$ 17,005
				To Bring PERS Account Current for Time lost in Early Years of PMUA	
				See Atty. Opinion Attached.	
<b>TOTAL</b>					<b>\$ 17,005</b>

**PLAINFIELD MUNICIPAL UTILITIES AUTHORITY**

127 ROOSEVELT AVENUE • P.O. BOX 5110  
 PLAINFIELD, N.J. 07061-5110  
 TEL (908) 226-2518 • FAX (908) 226-2561

**PURCHASE ORDER**

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

No. 10-00458

ORDER DATE: 04/05/10  
 REQUISITION NO:  
 DELIVERY DATE:  
 STATE CONTRACT NO:  
 F.O.B. TERMS:

IRS #22-3419364 TAX EXEMPT UNDER PROVISIONS OF N.J. SALES & USE TAX ACT (CHAPTER 30, LAW OF 1966).

CHECK NO. \_\_\_\_\_

CHECK DATE \_\_\_\_\_

SHIP TO  
VENDOR

P.M.U.A.  
 127 ROOSEVELT AVE.  
 PLAINFIELD, NJ 07060

VENDOR #PER05  
 PUBLIC EMPLOYEE'S RETIREMENT  
 STATE OF NJ DIV. OF PENSION  
 PO BOX 295  
 TRENTON NJ 08625-0295

QUANTITY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	PUBLIC EMPLOYEE'S RETIREMENT	0-07-10-200-220	8,140.0000	8,140.00
1.00	SYSTEM (PERS)	0-09-10-200-220	8,140.0000	8,140.00
	=====			
	PAYMENT FOR EARNED PENSION NOT PAID FROM 1995 TO 1997			
	PERS ACCOUNT FOR: ERIC C. WATSON			
			TOTAL	=====
				16,280.00

**VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT**

<p><b>VENDOR'S CERTIFICATION &amp; DECLARATION</b></p> <p>I do solemnly declare and certify under the penalties of the law that the within bill is correct in 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.</p> <p><b>X</b></p> <p>CLAIMANT _____ DATE _____</p>	<p><b>DEPARTMENT CERTIFICATION</b></p> <p>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.</p> <p>_____ SIGNATURE DATE _____</p>	<p><b>VENDOR: DO NOT ACCEPT THIS ORDER UNLESS SIGNED BY PURCHASING AGENT AND CHIEF FINANCIAL OFFICER</b></p> <p><b>REQUISITION APPROVAL</b></p> <p>_____ DEPARTMENT HEAD DATE _____</p> <p><b>PURCHASE ORDER APPROVAL</b></p> <p><i>Robert J. Hankin 4/6/2010</i> PURCHASING AGENT DATE _____</p> <p><b>CERTIFICATION OF FUNDS</b></p> <p><i>4/6/2010</i> CHIEF FINANCIAL OFFICER DATE _____</p>
<p><b>NOTICE TO VENDOR OR CONTRACTOR</b></p> <p>ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURES.              SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.              NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.              INVOICE MUST BE FOWARDED TO ORIGINATING DEPARTMENT WITH SIGNED VOUCHER.</p>	<p><b>PAYMENT APPROVAL</b></p> <p>_____ SIGNATURE DATE _____</p>	

**VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE FOR PAYMENT**

POSITION  
NUMBER

**PLAINFIELD MUNICIPAL  
UTILITIES AUTHORITY**

APPROVALS:

**Purchase Requisition**

Date: 4/1/10

Domina  
Dept. Name

Originator Authorization

VENDOR NO.: \_\_\_\_\_

VENDOR NAME: PERI - State of New Jersey

ADDRESS: For Account of Eric C. Watson

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ZIP: \_\_\_\_\_

BRC ON FILE: YES \_\_\_ NO \_\_\_

ACCOUNT CODE: Admin. - PERI - S&SW

Dept. Authorization

Finance Authorization

Purchasing Agent Authorization

SHIPPING INSTRUCTIONS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

SPECIAL INSTRUCTIONS:

P.O. # 10-0458

ITEM	QTY	UNIT	ACCOUNT	DESCRIPTION	AMOUNT
				<u>For Benefit of PERI Account of Eric C. Watson</u>	<u>16,280</u>
				<u>To Bring PERI Account Current for time lost in early years of AMUA.</u>	
				<u>See Atty. Review Attached</u>	

TOTAL \$ 16,280