OFFICE OF THE CHIEF PROCUREMENT OFFICER
COUNTY OF COOK

118 NORTH CLARK ST. ROOM 1018
CHICAGO, ILLINOIS 60602-1375
(312) 603-5370

THIS PURCHASE ORDER NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES, SHIPPING PAPERS AND DROP SHIPMENTS.

DATE
8/13/2014
F.O.B. POINT

PURCHASE ORDER NO.
189194 - 000- OP
REQUISITION NO.
00113901 OR

PURCHASE ORDERED ISSUED TO

846630

REPUBLIC SERVICES
2608 S. DAMEN AVE.
CHICAGO IL 60608

COOK COUNTY FEIN: 36-6006541
ILLINOIS SALES TAX EXEMPT: E-9998-2013-04
FEDERAL EXCISE TAX EXEMPT CERT: 36-75-D038K

SHIP TO Adult Probation - Administration
Cook County Administration Offices
69 W Washington Ste 1940
Chicago IL 60602

DELIVERY INSTRUCTIONS
Maureen Noonan 312-603-0259

DEPT NO	
5321453	Page 1 of 1

LINE	FURNISH THE FOLLOWING SUPPLIES AND/OR SERVICE	QUANTITY/ UOM	UNIT PRICE	EXTENDED PRICE	ACCOUNT NUMBER
1.00	SCAVENGER SERVICE ONE - 6 YARD CONTAINER WITH LID LOCATION: 1644 WEST WALNUT, CHICAGO, IL 60612 CONTAINER SHALL BE EMPTIED EVERY TUESDAY AND FRIDAY. CONTRACT PERIOD: DECEMBER 1, 2014 THROUGH NOVEMBER 30, 2016.	24.00 MO	129.0000	3,096.00	5321453.520060
2.00	CONTAINER PERMIT FEE MONTHLY CHARGE FOR CONTAINER PERMIT FEE.	24.00 MO	21.0000	504.00	5321453.520060
	*******	Total Order *******		3,600.00	

NOTE: VENDOR AGREES NOT TO EXCEED THE QUANTITY OR DOLLAR AMOUNT OF THIS ORDER WITHOUT WRITTEN AUTHORIZATION FROM THE CHIEF PROCUREMENT OFFICER

RECEIPT CERTIFICATION (FOR DEPARTMENT USE ONLY)
I hereby certify that I have received the goods/services reflected above and that the items referenced are in full conformity with the purchase order/contract.

Authorized Signature: _____ **Date:** _____

I hereby certify that this purchase is in agreement with the requisition on file authorizing the expenditure and is properly approved.
CHIEF PROCUREMENT OFFICER **Date:**
22 August 2014

CP

2Le NCR

Report: R56REQ2

Purchase Requisition

Office of the Purchasing Agent

Cook County of Illinois

Purchase Order Number

Requisition # OR 113901 Contract # 1426-13744

Open Date

Buyer Number 724150 Supervisor 40
Bid/Sole Src Code NCR
Business Unit 5321453
Internal Req Number 45324040
Board Apr Date & Item
Requisition Date 5/27/2014
Date Needed 5/27/2014

Ship To: 8000005 Adult Probation - Administrati
Cook County Administration Off
69 W Washington Ste 1940
Chicago IL 60602

Delivery Instructions:
Maureen Noonan
312-603-0259

Supplier: 299999 TEAM LEAD MAILBOX

One Time Purchase ____ Yes ____ No Covers Need for ____months. Specific Period of time _____ thru _____ Prior Contract No. _____ Expiration Date _____ Emergency No. _____

Line #	Commodity	Description	Bal. on Hand	Quantity	UOM	Est. Unit Cost	Extended Cost	Business Unit and Object Account
1.000	961	SCAVENGER SERVICE ONE - 6 YARD CONTAINER WITH LID LOCATION: 1644 WEST WALNUT, CHICAGO, IL 60612 CONTAINER SHALL BE EMPTIED EVERY TUESDAY AND FRIDAY. CONTRACT PERIOD: DECEMBER 1, 2014 THROUGH NOVEMBER 30, 2016.	< >	24.00	MO	135.0000	3,240.00	5321453.520060
2.000	961	CONTAINER PERMIT FEE MONTHLY CHARGE FOR CONTAINER PERMIT FEE.	< >	24.00	MO	15.0000	360.00	5321453.520060
						Total of Items Ordered	3,600.00	

CERTIFICATION

I hereby certify that the items and/or services above are necessary to this department (or institution) and that the dept. no., account & activity numbers indicated above accurately reflect the specific line item budget appropriation approved by the Board of County Commissioners and there is a sufficient unencumbered balance in the account to grant same.

Maureen Noonan
REQUISITIONER

BUREAU or DEPARTMENT HEAD

CCA

APPROVED BUDGETARY ACCOUNT

ACCT # _____

DATE _____ BY _____

PURCHASING USE ONLY