



**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.

PURCHASE ORDERED ISSUED TO
76616

Meadows Office Supply & Equipment
30W260 Butterfield Rd Ste 210
Warrenville IL 60555

DATE
9/24/2014
F.O.B. POINT

PURCHASE ORDER NO.
189671 - 000- OP
REQUISITION NO.
00114245 07

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

SHIP TO Medical Examiner
Robert J. Stein Institute
2121 W. Harrison RM 143
Chicago IL 60612-3706

DELIVERY INSTRUCTIONS
MEDICAL EXAMINERS OFFICE
NADINE JAKUBOWSKI(312)997-4481

DEPT NO	
71700259	Page 1 of 1

LINE	FURNISH THE FOLLOWING SUPPLIES AND/OR SERVICE	QUANTITY/ UOM	UNIT PRICE	EXTENDED PRICE	ACCOUNT NUMBER
1.00	ADJUSTABLE PHEUMATIC LABORATORY STOOL SEAT MATERIAL: VINYL; SEAT HEIGHT: 21 TO 28 INCHES (53.3 TO 71.1 CM); CASTERS; NO ARMRESTS; BLACK. WITH BACKREST; BACK WIDTH 17IN, BACK HEIGHT 12IN, WITH LUMBAR SUPPORT. MODEL # SAF 3406BL	20.00 EA	170.9500	3,419.00	71700259.560511.8300
2.00	LABORATORY PHEUMATIC CHAIR SEAT MATERIAL: VINYL; CASTERS; NO ARM RESTS; BLACK. THIS MULTI-SHIFT CHAIR CAN HANDLE CONTINUOUS SITTING 24 HOURS A DAY, 7 DAYS A WEEK. PLUS, IT CAN HANDLE WEIGHT CAPACITY UP TO 350LBS. THE MULTIPLE ERGONOMIC ADJUSTMENTS ALLOW CUSTOM CONFIGURATION FOR 24 HOUR COMFORT. FEATURES: 350LB. WEIGHT CAPACITY, BACK HEIGHT ADJUSTMENT, GAS LIFT SEAT HEIGHT, ONE TOUCH SLIDING SEAT DEPTH ADJUSTMENT MODEL # SAF 3391BV	20.00 EA	259.9500	5,199.00	71700259.560511.8300
***** Total Order *****				8,618.00	

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:

John G. M. 30 September 2014

AA