



**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
808793
Commercial Industrial Services LLC
170 Ruth St. N Unit 104
St. Paul MN 55119

DATE
12/2/2014
F.O.B. POINT

PURCHASE ORDER NO.
190610 - 000- OP
REQUISITION NO.
00115584 OR

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

SHIP TO Animal Control
Bridgeview Court Bldg. - 5th Dist Court
10220 South 76th Avenue - 2nd Floor
Bridgeview IL 60453

DELIVERY INSTRUCTIONS

Animal Control Attention: Donna
Ciesielski 708-974-6792

DEPT NO	
5100585	Page 1 of 1

LINE	FURNISH THE FOLLOWING SUPPLIES AND/OR SERVICE	QUANTITY/ UOM	UNIT PRICE	EXTENDED PRICE	ACCOUNT NUMBER
1.00	<p>Monthly Answering Service Contract No.1481-14177 Vendor will provide a 7 days a week after hours call center that routes calls to the assigned office area. Vendor will accurately obtain all information from complainants such as name, address, contact number, and the nature of the complaint; Operators will have basic knowledge of Animal Control's mission and its mandated, scripted response requirements; calls must be dispatched within 15 minutes of receiving calls; vendor will have the ability to contact Animal Control immediately regarding calls of an urgent or life threatening nature; all call information will be logged into the Department's database and stored into its archival media for seven (7) years.</p>	.00 LO	.0000	2,664.00	1312.300359
***** Total Order *****				2,664.00	

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: _____

[Handwritten Signature]

[Handwritten Initials]

Purchase Requisition

Office of the Purchasing Agent
Cook County of Illinois

Purchase Order Number
192612

Requisition # **OR 115584** Contract # **1481-14177** Open Date

Ship To: **724150 Supervisor 40** Delivery Instructions: **Animal Control Purchases** Supplier: **999999 OPEN MARKET PURCHASES**
118 N. CLARK ST. Rm. 1018 Animal Control Attention: **Dorina Ciesielski 708-974-6792**
CHICAGO IL 60602

Buyer Number: **8000019 Animal Control**
Bid/Sole Src Code: **NCR**
Business Unit: **5100585**
Internal Req Number: **14510018**
Board Apr Date & Item: **10/24/2014**
Requisition Date: **10/24/2014**
Date Needed: **10/24/2014**

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

Line #	Commodity Description	Ball on Hand	Quantity	UOM	Est. Unit Cost	Extended Cost	Business Unit and Object Account
1.000	961 Monthly Answering Service	<	36.00	MO	300.0000	10,800.00	5100585 520835
	After Hours Answering Service						
	24 Hours around the clock answering service that is routed to the assigned officer area. Provide all accurate information from complaints such as Name, Address, Contact Number, and the Nature of the Complaint. 7 days a week after hours call center with operator's knowledge with basic scripted information regarding Animal Control basic mandate response requirements.						
	Calls are dispatched with 15 minutes of receiving calls. Ability to contact the Administrator immediately if a call of urgent or life threatening nature comes into the call center. All call information is logged into our database and stored into our archival media for seven (7) years.						
Total of Items Ordered						<u>10,800.00</u>	

2014 OCT 29 AM 10:08

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

REQUESTOR: WRAPPED ISLAND
BUREAU or DEPARTMENT HEAD: [Signature]

CCA

APPROVED BUDGETARY ACCOUNT

PURCHASING USE ONLY

ACCT # _____
DATE _____ BY _____

Purchase Requisition

Office of the Purchasing Agent

Cook County of Illinois

Purchase Order Number

Requisition # **OR 115584** Contract #

Open Date

Buyer Number 8000019 Animal Control
 Bid/Sole Src Code NCR
 Business Unit 5100585
 Internal Req Number 14510018
 Board App Date & Item
 Requisition Date 10/24/2014
 Date Needed 10/24/2014

Ship To: 724150 Supervisor 40
 118 N. CLARK ST., Rm.1018
 CHICAGO IL 60602

Delivery Instructions:
 Animal Control Attention:
 Donna Ciesielski 708-974-6792

Supplier: 9999999 OPEN MARKET PURCHASES

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

Line #	Commodity Description	Ball on Hand	Quantity	UOM	Est. Unit Cost	Extended Cost	Business Unit and Object Account
1.000	961 Monthly Answering Service After Hours Answering Service	<	>	36.00	MO	300.0000	10,800.00 5100585 520835
<p>24 Hours around the clock answering service that is routed to the assigned officer area. Provide all accurate information from complaints such as Name, Address, Contact Number, and the Nature of the Complaint, 7 days a week after hours call center with operator's knowledge with basic scripted information regarding Animal Control basic mandate response requirements. Calls are dispatched with 15 minutes of receiving calls. Ability to contact the Administrator immediately if a call of urgent or life threatening nature comes into the call center. All call information is logged into our database and stored into our archival media for seven (7) years.</p>							
Total of Items Ordered							10,800.00

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.

CCA

APPROVED BUDGETARY ACCOUNT

PURCHASING USE ONLY

REQUISITIONER _____ BUREAU or DEPARTMENT HEAD _____

DATE _____ BY _____