



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  
93402

Chicago United Industries, Ltd.  
53 W Jackson Blvd Ste 815  
Chicago IL 60604

DATE  
12/15/2015  
F.O.B. POINT

PURCHASE ORDER NO.  
193888 - 000- OP  
REQUISITION NO.  
00121119 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 EXAMINER OFFICE  
NADINE JAKUBOWSKI(312)997-4481

DEPT NO  
1525909096 Page 1 of 1

LINE	FURNISH THE FOLLOWING SUPPLIES AND/OR SERVICE	QUANTITY/ UOM	UNIT PRICE	EXTENDED PRICE	ACCOUNT NUMBER
1.00	CONTRACT NO. 1581-15092 PIPETTE REPEATERS REPEATER STREAM # 13683505 or EQUIVALENT PER ATTACHED SPECIFICATIONS	4.00 EA	883.9100	3,535.64	1525909096.560431.8300
2.00	ADAPTERS FOR ML COMBITIPS # 21381103 or EQUIVALENT PER ATTACHED SPECIFICATIONS	8.00 EA	19.0900	152.72	1525909096.560431.8300
***** Total Order *****				3,688.36	

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. N.* 31 December 2015

*ONE*