



**OFFICE OF THE PURCHASING AGENT
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
91951
McMaster-Carr Supply Co
PO Box 4355
Chicago IL 60680-4355

DATE
2/15/2013
F.O.B. POINT

PURCHASE ORDER NO.
184395 - 000- OP
REQUISITION NO.
00107824 07

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

SHIP TO Facilities Management
Cook County Government Facility Warehse
2323 S. Rockwell Street
CHICAGO IL 60608-3712

DELIVERY INSTRUCTIONS
Tom Gschwind 312-433-
5509

DEPT NO
71700200 Page 1 of 1

LINE	FURNISH THE FOLLOWING SUPPLIES AND/OR SERVICE	QUANTITY/ UOM	UNIT PRICE	EXTENDED PRICE	ACCOUNT NUMBER
1.00	Complete wire partition 2 side Complete wire partition 2 side 10'Hx10'Lx20'W roon with roof McMaster-Carr #6719T66 Req# 32000051	1.00 EA	1,986.5400	1,986.54	71700200.560411.8300
***** Total Order *****				1,986.54	

NOTE: VENDOR AGREES NOT TO EXCEED THE QUANTITY OR DOLLAR AMOUNT OF THIS ORDER WITHOUT WRITTEN AUTHORIZATION FROM THE PURCHASING AGENT

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.

I hereby certify that this purchase is in agreement with the requisition on file authorizing the expenditure and is properly approved.

PURCHASING AGENT Date:

Authorized Signature: _____ Date: _____

John A. M 22 February 2013
Chs