

STATE OF NEW JERSEY <b>AGENCY PURCHASE ORDER</b>				DOCUMENT			DATE	REQUISITION NUMBER	FY
				TC	AGY	NUMBER			
P O #: 8223259				PO	042	48758223259	12/02/15	R	16
				(DPA) DIRECT PURCHASE AUTHORIZATION				VENDOR ID NUMBER	00
								TOTAL AMOUNT	
								\$	980.00
CONTRACT NO	AGENCY REF	BUYER	TERMS						
			NONE						

VENDOR NAME AND ADDRESS	SHIP F.O.B. DESTINATION TO:
HOMESTEAD ROOFING CO INC 533 GOFFLE RD RINGWOOD NJ 07450	BUREAU OF PARKS (424875/S057) RINGWOOD STATE PARK (DEP) 1304 SLOATS BURG RD. RINGWOOD NJ 07458

Direct Purchase or Special Procurement, Indicate Date Quotation Received →	11/20/15
--	----------

CONTACT	MYRTLE VAN DIJK (973) 962-2257
---------	--------------------------------

BILL TO:	
DEPT OF ENVIRONMENTAL PROTECT (424875/8015) BUREAU OF PARKS NORTHERN REGIONAL OFFICE PO BOX 1100 ANDOVER NJ 07821	

**IMPORTANT: THIS PURCHASE ORDER CONTAINS PROMPT PAYMENT INFORMATION**

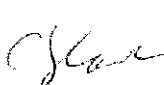
VENDOR REFERENCE
------------------

FUND	AGCY	ORG CODE	SUBORG	APPR UNIT	ACTIVITY CO	OBJECT CD	SUB-OBJ	REV SRCE	SUB-REV	PROJECT/JOB NO
100	042	421A		378	V8YF	7110				A7571200

RPT CT	AMOUNT
1	980.00
2	
3	

INSTRUCTIONS TO VENDORS: ENCLOSE PACKING SLIP WITH SHIPMENTS. SUBMIT ALL BILLS ON ATTACHED STATE VOUCHER FORMS. IF PARTIAL BILLING SUOMIT BALANCE ON SEPARATE STATE VOUCHER FORMS. SHOW PURCHASE ORDER NUMBER ON ALL BILLS OF LADING. INVOICES AND CORRESPONDENCE TO THE STATE AGENCY INDICATED ABOVE. N.J.S.A. 64:32B-1 ET SEQ. EXEMPTS NJ STATE AGENCIES FROM SALES OR USE TAXES. DO NOT INCLUDE THEM IN YOUR PRICE.

ITEM NO.	COMMODITY CODE/DESCRIPTION OF ITEM	QUANTITY	UNIT	UNIT PRICE	AMOUNT
00001	REPRINT OF DPA DATED: 11/20/15 DELIVERY: 005 DAYS ARO COMMODITY CODE: 145-60-000000 [ROOFING] ITEM DESCRIPTION: REPLACE MISSING SHINGLES FROM STORM DAMAGE AT SHEPHERD LAKE CHAPEL.	1.000	EACH	980.00	\$ 980.00

AGENCY APPROVAL: This transaction is authorized by the Director, Division of Purchase and Property in accordance with the provision of Chap. 107 P.L. 1985 as amended. The Issuing Agency's Approval Officer's signature guarantees compliance with all provisions governing the authorization granted by the Director. Signature affixed to this document serves as certification that: 1) items purchased under DPA authorization are not currently available under the provisions of a current State contract, nor from the State Distribution Center, nor from DEPTCOR (State Use Industries); 2) funds required and authorized for this purpose are available. Unauthorized use is subject to prosecution.	 Authorized Signature Title Date 12/2/15
---	--

<b>STATE OF NEW JERSEY PAYMENT VOUCHER (VENDOR INVOICE)</b>		DOCUMENT				BATCH				ACTG PER.	FY					
		TC	AGY	NUMBER		TC	AGY	NUMBER			16					
		PV 042														
P O #: 8223259		PV DATE		PP START			SCHED PAY			CHK	OFF	F	PY	CK	(A) VENDOR ID NUMBER	
				MD	DY	YR	MO	DY	YR	CAT	LIAB	A	TP	FL	V00007184	00

CONTRACT NO	AGENCY REF	BUYER	(B) TERMS	PAYEE: SEE INSTRUCTIONS FOR COMPLETING ITEMS (A) THROUGH (G)	(C) TOTAL AMOUNT
			NONE		\$ 980.00

(D) PAYEE NAME AND ADDRESS	(E) SEND COMPLETED FORM TO:
HOMESTEAD ROOFING CO INC 533 GOPPLE RD RIDGEWOOD NJ 07460	DEPT OF ENVIRONMENTAL PROTECT BUREAU OF PARKS (424875/8015) NORTHERN REGIONAL OFFICE PO BOX 1100 ANDOVER NJ 07821

(F) PAYEE DECLARATION

I CERTIFY THAT THE WITHIN PAYMENT VOUCHER IS CORRECT IN ALL ITS PARTICULARS, THAT THE DESCRIBED GOODS OR SERVICES HAVE BEEN FURNISHED OR RENDERED AND THAT NO BONUS HAS BEEN GIVEN OR RECEIVED ON ACCOUNT OF SAID DOCUMENT.

▶▶▶▶▶ \_\_\_\_\_ PAYEE SIGNATURE

\_\_\_\_\_ PAYEE TITLE

\_\_\_\_\_ BILLING DATE

LINE NO	REFERENCE				(G) PAYEE REFERENCE
	CD	AGY	NUMBER	LINE	
1					
2					
3					

BFY	FUND	AGCY	DRG CODE	SUBORG	APPR UNIT	ACTIVITY CD	OBJECT CD	SUB-OBJ	REV SRCE	SUB-REV	PROJECT/JOB NO
1	100	042	4ZTA		378	V6YF	7110				A7571200
2											
3											

	RPT CT	BS ACT	DESCRIPTION	DT	QUANTITY	AMOUNT	ID	PF	TX
1						980.00			
2									
3									

ITEM NO.	COMMODITY CODE/DESCRIPTION OF ITEM	QUANTITY	UNIT	UNIT PRICE	AMOUNT
00001	REPRINT OF INVOICE DATED: 11/20/15 DELIVERY: 005 DAYS ARD COMMODITY CODE: 145-60-000000 [ROOFING] ITEM DESCRIPTION: REPLACE MISSING SHINGLES FROM STORM DAMAGE AT SHEPHERD LAKE CHAPEL	1.000	EACH	980.00	\$ 980.00

CERTIFICATION BY RECEIVING AGENCY: I certify that the above articles have been received or services rendered as stated herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

CERTIFICATION BY APPROVAL OFFICER: I certify that this Payment Voucher is correct and just, and payment is approved.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**HOMESTEAD ROOFING CO., INC.**

533 Goffle Road  
RIDGEWOOD, NJ 07450  
"Since 1930"

(201) 444-2233 Fax (201) 447-5817

12/29/2015

Ref No. 22540  
Rep GLEN  
Job Date  
P.O. No. 8223259

**BILL TO:**

Kristy DeFreese  
Ringwood State Park  
1304 Sloatsburg Road  
Ringwood, NJ 07456

**JOB AT:**

Chapel

Phone# 551-579-3351

DESCRIPTION OF WORK AND SERVICES RENDERED	Amount
JOB COMPLETED AS PER WORK ORDER: FIXED/REPAIRED MISSING SHINGLES ON CHAPEL.	980.00

	Subtotal	Sales Tax (7.0%)	Total
	\$980.00	\$0.00	\$980.00
Payments/Credits			\$0.00
<b>Balance Due</b>			<b>\$980.00</b>

Terms:

IF PAYING BY MASTERCARD OR VISA: ACCT#

SECURITY VERIFICATION NUMBER FROM BACK OF CREDIT CARD:  
EXP. DATE:

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Note: In the event this account becomes delinquent for more than Ninety (90) days, all collection costs, court costs, attorney fees and interest accrued while collecting this account will be the responsibility of the customer.