CONTROL 25523

25024

OTERO COUNTY

PURCHASE ORDER
EEO/AAE

Show this number on all packages and paperwork

P.O. NUMBER 150792

P.O. DATE 03/18/15

VENDOR	SHIP F.O.B. TO:	INVOICE TO:
[370] 505-437-2811 LANE PLUMBING CO, INC PO BOX 634 1229 OREGON AVE ALAMOGORDO, NM 88310	OTERO COUNTY PURCHASING 1101 NEW YORK AVE. ALAMOGORDO, NM 88310 PHONE: (575) 434-0710 FAX: (575) 443-2914	OTERO COUNTY ADMINISTRATION ATTEN: ACCTS. PAYABLE 1101 NEW YORK AVE. ALAMOGORDO, NM 88310

DELIVERY VIA:	DELIVERY DATE:	PAYMENT TERMS:	CONFIRMATION WITH:
YOUR TRUCK	03/19/15	N/30	

D/ITEM	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL PRICE
1 (14)	1	EA	WATER HEATER 100 GALLON INSTALLATION AND MATERIALS	$7,508.20	7,508.20

SUB TOTAL

GRAND TOTAL 7,508.20

PAGE 1 OF 1 PAGES

CONFIRMATION ONLY, UNLESS OTHERWISE NOTED
DO NOT DUPLICATE

Karen Roberson
PURCHASING AGENT
for GINGER HERNDON

rev8/90

VENDOR'S COPY

OTERO COUNTY

1101 NEW YORK AVE.
ALAMOGORDO, NEW MEXICO 88310
(575) 434-0710 FAX (575) 443-2914

PURCHASE REQUISITION

115876

SEALED BID NO. ____ ADV. DATE ___/___/___
WRITTEN QUOTE NO. ____ OPEN DATE ___/___/___
CONTRACT NO. ____ EXPIRE DATE ___/___/___

REQUISITIONER: PLEASE COMPLETE BLACK SHADED AREA BELOW.

DATE 3/18/15 DATE NEED BY ___/___/___ SUGGESTED SOURCE(S) Lane Plumbing
REQUISITIONER Detention
PHONE 434-2519 EXT. 14223
FUND 14 DEPT. 14
NATURE OF NEED Jail Repair / Maint

P.O. NO. 150792 DATE 3/18/15
VENDOR Lane Plumbing
VENDOR NO. ____ EST. DEL. DATE ___/___/___
PERSON CONFIRMING —
TERMS net 30
SHIP VIA —

ITEM NO.	QUANTITY REQUESTED	UNIT OF MEASURE	LINE CODE	PART NO.	DESCRIPTION	EXTENDED COST	UNIT PRICE	EXTENSION
1	1	EA	238		100 Gallon Commercial Water Heater & Installation Labor			7508 20

SOLE SOURCE | EMERGENCY X | NO SUBSTITUTE | PLEASE JUSTIFY YOUR SELECTION AT LEFT IN DETAIL ON BACK OF FIRST PAGE. Maint | Thank You! | TOTAL

FREIGHT
HANDLING
TAXES
TOTAL 7508.20

REQUISITIONER SIGNATURE Sal Sanchez Specialist

I HEREBY CERTIFY THAT THE ARTICLES AND/OR SERVICES REQUIRED HEREON ARE NECESSARY TO PROPERLY CONDUCT THE ACTIVITIES OF THIS DEPARTMENT.

AUTHORIZED SIGNATURE X

A/P USE ONLY

1 VENDOR ____ CONTACT ____ PHONE ____ FAX ____

2 VENDOR ____ CONTACT ____ PHONE ____ FAX ____

3 VENDOR ____ CONTACT ____ PHONE ____ FAX ____

ITEM NO.	QTY.	C.O. NO.	UNIT PRICE	EXTENSION

COMMENTS ____ TOTAL ____

OTCPURR-1 REV. 4/01

SOLE SOURCE, EMERGENCY, NO SUBSTITUTE JUSTIFICATION

Emergency Water heater replacement for health & well being of Inmates

AUTHORIZED SIGNATURE X

DATE 03/18/15