

**RESOLUTION**  
of the  
**BOROUGH OF NEW PROVIDENCE**  
Resolution No 2015-062

Council Meeting Date: 01-28-2015

Date Adopted: 01-28-2015

TITLE: RESOLUTION APPROVING PURCHASE ORDER #50405 FOR ELECTRONIC COMMERCE LINK, INC., IN AN AMOUNT NOT TO EXCEED \$3,084.00 FOR WEBSITE MAINTENANCE

Councilperson Galluccio submitted the following resolution, which was duly seconded by Councilperson Madden.

BE IT RESOLVED by the Mayor and Council of the Borough of New Providence, in the County of Union and State of New Jersey, that they do hereby approve purchase as follows:

- Purchase Order - 50405
- Administration - 10-15-001-101-2-09010
- Amount - \$3,084.00

Said purchase order is made and approved in the form as attached hereto and made a part thereof. Funds for said purchase order are certified available from Current Budgeted Appropriations.

APPROVED, this 28<sup>th</sup> day of January, 2015.

RECORD OF VOTE

|           | AYE | NAY | ABSENT                    | NOT VOTING |
|-----------|-----|-----|---------------------------|------------|
| GALLUCCIO | X   |     |                           |            |
| GENNARO   | X   |     |                           |            |
| KAPNER    | X   |     |                           |            |
| MADDEN    | X   |     |                           |            |
| MUÑOZ     | X   |     |                           |            |
| ROBINSON  | X   |     |                           |            |
| MORGAN    |     |     | TO BREAK COUNCIL TIE VOTE |            |

I hereby certify that the above resolution was adopted at a meeting of the Borough Council held on the 28<sup>th</sup> day of January, 2015.

Wendi B. Barry, Borough Clerk

# BOROUGH OF NEW PROVIDENCE PURCHASE ORDER

50405

360 ELKWOOD AVE

Clerk-4319

ECLINK

NEW PROVIDENCE, NJ 07974-1838

|                           |           |
|---------------------------|-----------|
| DATE                      | 1/21/2015 |
| PAGE NO.                  | 1         |
| CHECK NO.                 |           |
| TAX EXEMPT NO. 22-6002132 |           |

[www.newprov.org](http://www.newprov.org)

**SIGN & RETURN TO ADDRESS ABOVE**

| VENDOR  | SHIP TO   |
|---|---|
| ELECTRONIC COMMERCE LINK, INC.<br>EC LINK<br>4303 HAMILTON AVENUE<br>CINCINNATI, OH 45223 | MUNICIPAL CENTER-CLERK<br>360 ELKWOOD AVE<br><br>NEW PROVIDENCE, NJ 07974<br>Attn: DENISE GELORMINI |

**SPECIAL INSTRUCTIONS**

**BRC: 1547906**

| ITEM NO.                                  | ITEM DESCRIPTION  | QUANTITY | UNIT PRICE     | AMOUNT          |
|---|---|----------|----------------|-----------------|
| 1   | INVOICE 10617, 2014 ANNUAL MAINTENANCE, WEBSITE HOSTING, AND CONTENT MANAGEMENT - E-GOV.<br>10-15-001-101-2-09010 | 1        | 3,084.00       | 3,084.00        |
| <b>NO ORDER VALID UNLESS SIGNED BELOW</b> |   |          | <b>TOTAL</b> → | <b>3,084.00</b> |



VOUCHER

SIGN AND RETURN TO DEPARTMENT TAKING DELIVERY

|  |   |
|--|---|
| CERTIFICATION OF AVAILABLE FUNDS   |   |
| <i>Wendi B. Barry</i><br>PURCHASING AGENT  | <i>Kathy Herrigel</i><br>FINANCE DEPARTMENT |
| <b>DEPARTMENT HEAD CERTIFICATION</b>   |   |
| I certify that the materials and supplies have been received or the services rendered. |   |
| _____<br>AUTHORIZED SIGNATURE  | _____<br>DATE                               |
| <b>APPROVAL FOR PAYMENT</b>  |   |
| _____<br>COUNCIL MEMBER  | _____<br>ADMINISTRATOR                      |
| _____<br>DATE  | _____<br>DATE                               |

|  |                           |
|--|---------------------------|
| <b>VENDOR CERTIFICATION AND DECLARATION</b>  |                           |
| <p>I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.</p> |                           |
| X  | _____<br>VENDOR SIGN HERE |
| _____<br>TITLE   | _____<br>DATE             |
| _____<br>VENDOR SOCIAL SECURITY NO. OR TAX I.D. NO.  |                           |

**VOUCHER - SIGN AT (X) AND RETURN FOR PAYMENT (SEE CONDITIONS ON REVERSE SIDE)**