

RESOLUTION
of the
BOROUGH OF NEW PROVIDENCE
Resolution No 2015-173

Council Meeting Date: 04-27-2015

Date Adopted: 04-27-2015

TITLE: RESOLUTION APPROVING PURCHASE ORDERS FOR WHITEWATER RAFTING ADVENTURES, IN AN AMOUNT NOT TO EXCEED \$3,500.00 FOR TEEN VENTURE CAMP PROGRAM

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

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
- Recreation Trust - 45—002-500-2-59006
- Amount - \$3,500.00

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 27th day of April, 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 27th day of April, 2015.

Wendi B. Barry, Borough Clerk

BOROUGH OF NEW PROVIDENCE PURCHASE ORDER

51030

360 ELKWOOD AVE

Rec-1778

WHITEW

NEW PROVIDENCE, NJ 07974-1838

DATE	4/23/2015
PAGE NO.	1
CHECK NO.	
TAX EXEMPT NO. 22-6002132	

www.newprov.org

SIGN & RETURN TO ADDRESS ABOVE

VENDOR	SHIP TO
WHITEWATER RAFTING ADVENTURES 101 W. ADVENTURE TRAIL ROAD NESQUEHONING, PA 18240	RECREATION DEPARTMENT BOROUGH OF NEW PROVIDENCE 360 ELKWOOD AVE NEW PROVIDENCE, NJ 07974 Attn: TZU-LIN TONER

SPECIAL INSTRUCTIONS

BRC: 00000

ITEM NO.	ITEM DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1	Teen Venture Camp - Rafting on Wednesday, July 5, 2015. 10 DEPOSIT. 45--002-500-2-59006	1	165.00	165.00
2	Rafting on Wednesday, July 29, 2015. 10 DEPOSIT. 45--002-500-2-59006	1	165.00	165.00
			TOTAL	330.00

NO ORDER VALID UNLESS SIGNED BELOW



VOUCHER

SIGN AND RETURN TO DEPARTMENT TAKING DELIVERY

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

VENDOR CERTIFICATION AND DECLARATION

X

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.

VENDOR SIGN HERE

TITLE _____ DATE _____

VENDOR SOCIAL SECURITY NO. OR TAX I.D. NO. _____

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

BOROUGH OF NEW PROVIDENCE PURCHASE ORDER

51031

360 ELKWOOD AVE

Rec-1779

WHITEW

NEW PROVIDENCE, NJ 07974-1838

www.newprov.org

SIGN & RETURN TO ADDRESS ABOVE

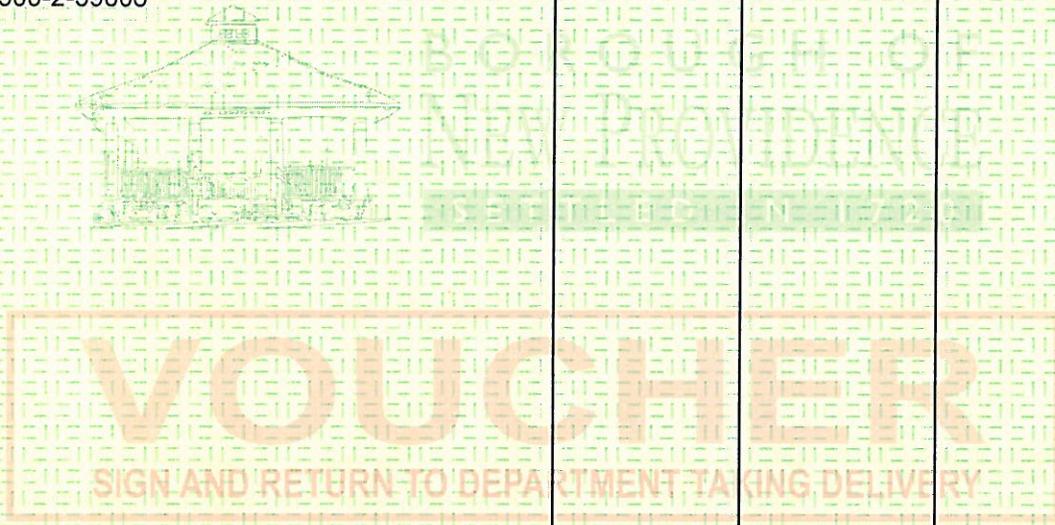
DATE	4/23/2015
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SPECIAL INSTRUCTIONS

BRC: 00000

ITEM NO.	ITEM DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1	Teen Venture Camp - Rafting on Wednesday, July 5, 2015. BALANCE. 45--002-500-2-59006	1	1,500.65	1,500.65
2	Rafting on Wednesday, July 29, 2015. BALANCE. 45--002-500-2-59006	1	1,500.65	1,500.65
NO ORDER VALID UNLESS SIGNED BELOW			TOTAL	3,001.30



Wendi B. Barry
PURCHASING AGENT

CERTIFICATION OF AVAILABLE FUNDS
Kathy Herrigel
FINANCE DEPARTMENT

VENDOR CERTIFICATION AND DECLARATION

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.

X

VENDOR SIGN HERE

TITLE _____ DATE _____

VENDOR SOCIAL SECURITY NO. OR TAX I.D. NO. _____

DEPARTMENT HEAD CERTIFICATION

I certify that the materials and supplies have been received or the services rendered.

AUTHORIZED SIGNATURE _____ DATE _____

APPROVAL FOR PAYMENT

COUNCIL MEMBER _____ DATE _____ ADMINISTRATOR _____ DATE _____

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