

**Requisition
W.I.C. PROGRAM**

Req # 00246149

PO #

Date: 10/24/13

Bill To: x
x

Vendor: 133655
SUPERIOR ALARMS
P. O. BOX 3097
MCALLEN TX 78502
FAX (956)971-6395

Ship To: W.I.C. PROGRAM
3105 W. UNIVERSITY DR
EDINBURG TX 78539

Contact: MGONZALEZ
956-381-4646

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
6.00	MONTH	EDINBURG WIC CLINIC 1201 DO NOT DUPLICATE ORDER MONITORING SERVICES FOR THE FIRE AT THE EDINBURG WIC CLINIC 1201 3105 W. UNIVERSITY. OPTION THAT P.O. MIGHT INCREASE	25.00	150.00
6.00	MONTH	MONITORING SERVICES FOR SECURITY AT THE EDINBURG WIC Account No 3-1292-441-00-350-001-4-413	15.00	90.00
			Encumbrance	
			240.00	
			Freight	.00
			Total	240.00

Authorized By: _____

**Requisition
W.I.C. PROGRAM**

Req # 00246006

PO #

Date: 10/22/13

Bill To: x
x

Vendor : 133655
SUPERIOR ALARMS
P. O. BOX 3097
MCALLEN TX 78502
FAX (956)971-6395

Ship To: W.I.C. PROGRAM
3105 W. UNIVERSITY DR
EDINBURG TX 78539

Contact: mgonzalez
956-381-4646

Contract No:

Special Instructions:

FIRE DIALER FOR THE EDINBURG WIC AS PER FIRE MARSHAL

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	EACH	EDINBURG WIC CLINIC, 3105 E. RICHARDSON DO NOT DUPLICATE ORDER		
1.00	EACH	FIRE DIALER, AS PER THE FIRE MARSHAL IS NEEDED AND THAT IS REQUIRED for the Edinburg WIC CLINIC TO PASS INSPECTION	496.00	496.00
1.00	EACH	LABOR TO CONNECT HEALTH DEPT.	65.00	65.00
6.00	MONTH	65 MONITORING SERVICES	25.00	150.00
		Account No _____	<u>Encumbrance</u>	
		3-1292-441-00-350-001-4-431	711.00	
			Freight	.00
			Total	711.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____