

RECEIVED
FEB 06 2014

BY: TM

RECEIVED BY
COUNTY AUDITOR

***** A CLEAN PORTOCO *****
* P.O. BOX 531607 *
* HARLINGEN, TX 78553 *
* 956-230-1370 *
* FAX 956-230-1450 *

2014 FEB 6 PM 1 50

Invoice Received By:
Tonia Moore on 2-6-14
Goods/Services Received By:
Vera Lopez on 1-22-14

4-1200431-00-124-007-0-921
Pct. # 134
Pur. Req. # 251187
P.O. # 704130 TRAB

Customer ID=====Contract Number
2HIDC2 RENTAL INVOICE 01-143247-02

01/22/14 HIDALGO COUNTY PCT. #4 HIDALGO COUNTY PCT. #4
ATTN: ACCTS PAYABLE 1051 N DOOLITTLE RD.
EDINBURG, TX 78542
EDINBURG, TX 78542
956-383-3112

P.O. Dated
After services

P/O number: 698225 704130 Sales: P-3
D1:W ON EXP 83;N ON CAGE BLVD;E ON RICHARDSON ST;SITE
D2:LHS;SVC AFTER 2PM;UNITS @ LOCATED BACK OF SHOP;IF
D3:GATE LOCKED CALL 358-5794 REGIRT:P3 R2: R3:
SU: MO: TU: WE:003 TH: FR: SA:
ORDER TRANS FROM CONTRACT 02-1136813 ...ET
Job: TM-035 2HIDC2 1051
From: THU 01/23/14 07:30
Thru: THU 02/20/14 07:30

Item No.	Qty	Description	Rate	Info	Unit	Extended
0001-0210	6	SERVICE - CUSTOMER'S UNIT RR	25.25		101.00	606.00
		Rates:	25.25/d	25.25/w	101.00/28d	
0001-0200	6	DISPOSAL - CUSTOMER'S UNIT RR	1.00		4.00	24.00
		Rates:	1.00/d	1.00/w	4.00/28d	

Receipts Summary			Summary	
Date	Seq Method	Ref/PO	Amount	
01/22/14	02	Charge	630.00	SERVICE 606.00 DISPOSAL 24.00
>>>>Amt Due this Invoice:			630.00	Total 630.00
Total Unpaid this Contract:			630.00	

THU 02/20/14 07:30



Purchase Order COUNTY OF HIDALGO

PO# 704130

DATE: 02/03/14

PAGE NO: 1 Of 1

PO TYPE:

VENDOR: 199362

REQ: 00251187

PHONE: (956) 230-1370

Fax: (956) 230-1450

EMAIL:

SHIP TO: HIDALGO CO. PCT 4

1051 N. DOOLITTLE
EDINBURG TX 78542

ANRIGE, INC.
D/B/A A CLEAN PORTOCO
P.O. BOX 531607
HARLINGEN TX 78553

CONTACT:

SITE: COMMISSIONER, PRECINCT 4

SPECIAL INSTRUCTIONS: PCT. REQ#134

VENDOR NOTES

1. Do not add to, or alter this Purchase Order. This Order is not renewable.
2. TAX EXEMPTION: This Purchase Order may be accepted in lieu of Exemption Certificate.
3. This Order is also placed F.O.B. Destination. Vendor must repay all shipping costs.
4. Invoice each Purchase Order singly. Original invoices are required customer copy may be accepted. Out number must appear on all invoices, bills of lading, and packages.
5. Payment will be made only for bona fide and full completed orders, unless otherwise attached.

QTY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER <u>Inv. 01-K3247-02</u>		
6.00	EACH	OM OM Blanket Purchase Order for the month of JAN- JUNE. to service six (6) Portable Toilets @ the Pct. 4 1051 N. Doolittle location	101.00	606.00
6.00	EACH	OM Disposal Fee	4.00	24.00
		TOTAL:		630.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		***** For Hidalgo County use only 4-1200-431-00-124-007-0-421		630.00

Authorized by: Martha Salazar msh