

Reg 434251

HIDALGO COUNTY AUDITOR'S OFFICE
HIDALGO COUNTY, TEXAS

PURCHASE AFFIDAVIT

THE STATE OF TEXAS

COUNTY OF HIDALGO

I, Pedro Orozco, do hereby state that the item(s) listed on the invoice(s) named below
PURCHASER'S NAME

were purchased for the exclusive use of Hidalgo County: 405-15

INVOICE NO.	DATE	AMOUNT	NAME OF COMPANY
<u>9121412</u>	<u>5-10-21</u>	<u>34.96</u>	<u>Stripes</u>
TOTAL		<u>34.96</u>	<u>acct#</u>

1-1100-441-00-340-001-0-626

I further state that I was authorized to make such a purchase(s).

I therefore request reimbursement of this invoice (these invoices) from Hidalgo County and that payment be made payable to me.

SIGNATURE: [Signature]
TITLE: [Signature]

PERSON MAKING PURCHASE

Before me Sylvia Rocha, a Notary Public, appeared Peter Orozco
and on h__ oath depose and stated that the foregoing facts as set forth in the above request for
expense reimbursement are true and correct in every respect. H_ / S_ further stated h_ / s_
requested payment of the same.

(SEAL)



Sylvia Noemi Rocha
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

APPROVAL: [Signature] 5-18-21
DEPARTMENT HEAD

APPROVAL: _____
COUNTY AUDITOR

WELCOME TO
112 N. HWY 281
361-325-2560
STRIPES 2476
CALEFORNIA TX 77355

DATE 05/10/21 08:19
TRAN# 9121412
PUMP# 12
SERVICE Level: SELF
PRODUCT: DSL
GALLONS: 11.658
PRICE/G: \$ 2.999
FUEL SALE \$ 34.96
DEBIT \$34.96

Debit
Payment from
Primary Account
*****9123
Entry Method: Swiped
Auth #: 84913
Resp Code:
Stan: 17838324302
Invoice #: 443909
Store # 4764965

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visit.com](http://www.exxonmobilvisit.com)

Diesel Fuel Contain
Up To 5% Biodiesel
or Renewable State
Diesel Tax \$0.19 Pe
Gallon. Thank You

Pedro Orozco



Purchase Order COUNTY OF HIDALGO

PO# 832429

DATE: 05/24/21

PAGE NO: 1 of 1

PO TYPE:

VENDOR: 280941

REQ: 00434251

PHONE:

EMAIL:

SHIP TO: HEALTH DEPARTMENT

1304 S. 25TH
EDINBURG TX 78539

OROZCO, PEDRO
C/O HEALTH DEPT.

CONTACT: JOSIE GARCES

(956) 383-6221

SITE: HEALTH

CONTRACT NO: EXEMPT

SPECIAL INSTRUCTIONS:

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		
		COUNTY FUEL CARD DID NOT WORK WHEN TRANSPORTING A TB PATIENT TO SAN ANTONIO		
1.00	EACH	RM FUEL PURCHASE FOR PTV (PATIENT TRANSPORT VEHICLE) LP 143-2864, MERZ AMBULANCE, YEAR 2019, VIN WDAPF3CDXKN035781	34.9600	34.96
		TOTAL:		34.96
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		***** For Hidalgo County use only		
		1-1100-441-00-340-001-0-626	34.96	

Authorized by: Martha L. Salazar