



Purchase Order/Expense Voucher Form

Voucher No: _____
Purchase Order No: _____

Purchase Order

Expense Voucher

Vendor Name: Overhead Door	Vendor Code:
Voucher Date: 8/23	Invoice Number: 307699
400 Poplar St. Pittsburgh, PA. 15223	Invoice Date: 8/23/19 Due Date: UPON RECEIPT Ship to: SAME AS ADDRESS
Phone Number: (412)781-4000	
Vendor Terms: NET 30 DAYS	Bill to: SAME AS ADDRESS

Billable (Y/N).	Date	Item Description or Destination	Sub-Total	Amount
Y	8/23/19	WV041, CSS 12968, Wo 4874 – Overhead Door		\$1332.34
TAX:				
(LESS) COMPANY CREDIT CARD:				
P.O. not to exceed:				
TOTAL:		(Due to Employee / Vendor)		\$1332.34

Joe Bayne 508304 8/23/19

Voucher Completed by: _____ Employee No. _____ Date _____

Supervisor Signature: _____ Employee No. _____ Date _____

Checked By:

Program Manager/Assistant Program Manager Signature: _____ Employee No. _____ Date _____

Vice President, Administration Signature: Employee No. Date

The Genuine. The Original.



INVOICE

Invoice #307699

Date: 06/24/19

Ship To:

**WEIRTON USARC
100 FRONT STREET
WEIRTON, WV 22312**

Bill To:
**CMI MANAGEMENT
PRODUCTION CONTROL
5285 SHAWNEE ROAD, SUITE 510
ALEXANDRIA, WV 22312**

Customer PO #	Customer Phone	Sales Representative	*Terms	Factory Ack.	Job #
CSS129868			SERVICE UPON RECEIPT	CMI/ARM	11509

Description	Total
4/18 - LABOR AND MATERIAL TO INSTALL ONE (1) SECTION AND ONE (1) PNEUMATIC EDGE KIT AS PER QUOTE.	1332.34

LABOR - 7.5 MAN HRS @ 98.00 = \$735.00
MATERIAL - \$697.34

Invoice subtotal 1332.34

Invoice total 1332.34

*NOTE: Late payments shall incur an additional charge of 1-1/2% interest per month or fraction thereof.

1332.34

Bal. Due

Thank You

OVERHEAD DOOR COMPANY OF GREATER PITTSBURGH - 400 POPLAR STREET - PITTSBURGH, PA 15223
PHONE 412-781-4000 FAX 412-781-2446

The Genuine. The Original.



Date	3/13/2010	Work #	11509
Job #	11509		
Name	Wellton USARC - CSS12068 100 Front Street Wellton WV 26062		
Contact	Shane Fabian 724-584-7819		
Billing	CMV Management Production Control 5285 Shawnee Road, Suite 510 Alexandria WV 22312		

JOHN

Upon inspection our service technician recommends:

NATURE OF CALL

Install bottom section and pneumatic safety edge kit

✓ JADP
14'2" x 14'
16'0" x 16'
18'0" x 18'

✓ STOCK

JOB COMPLETED YES () NO () ACCEPTED BY: X

DESCRIPTION OF WORK PERFORMED 2nd CALL

Upon inspection our service technician recommends:

Install quote to

Recommendations NOT required by

PRINT NAME

TRAVEL	4-18-10	LABOR	11509	AMOUNT
IN	700			
OUT	1035			
TRAVEL	2-hrs 2 min			
MECH	ED			
MECH	11509 Service			

"OVERHEAD DOOR" SCISSOR LIFT OR FORK LIFT USED:	NONE () ONE () BOTH ()
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DESCRIPTION OF WORK PERFORMED 1st CALL

INSTALL 2 BOTTOM SEC AND
PNEUMATIC SAFETY KIT
AND 1 BOTTOM FIXTURE

JOB COMPLETED YES () NO () ACCEPTED BY: X

DESCRIPTION OF WORK PERFORMED 3rd CALL

JOB COMPLETED	YES () NO ()	ACCEPTED BY:
QUANTITY	MATERIAL DESCRIPTION	AMOUNT
1	SECTION	
1	ED KIT	
1	BOTTOM FIXTURE	
1	LUBE	

TRAVEL	11509	AMOUNT
IN		
OUT		
TRAVEL		
MECH		
MECH		

ATTACHMENT J-0200000-05
FORMS

Over and Above Repair Work Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: _____ Date: _____

Signed: _____

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Shane Fabian Date: 8-16-19

Signed: Shane Fabian

E-Mail: Shane.e.fabian.ctr@mail.mil

