



MIAMI-DADE COUNTY  
BLANKET PURCHASE ORDER

BPO ID: ABCW1600156

PRINT DATE: 01/20/2016

PAGE: 02

\*\* ORIGINAL \*\*

AUTHORIZED DEPT: CALLER ID	AUTHORIZED DEPTS/USERS CR***** CALLERS NAME	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****		\$50,000.00	( ) -

AUTHORIZED DEPT: CALLER ID	AUTHORIZED DEPTS/USERS ME***** CALLERS NAME	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****		\$16,000.00	( ) -

AUTHORIZED DEPT: CALLER ID	AUTHORIZED DEPTS/USERS PR***** CALLERS NAME	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****		\$60,000.00	( ) -

AUTHORIZED DEPT: CALLER ID	AUTHORIZED DEPTS/USERS SP***** CALLERS NAME	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****		\$10,000.00	( ) -

TERMS:

COSTS OF MANDATORY RANDOM AUDIT BY THE INSPECTOR GENERAL ARE INCORPORATED INTO THIS CONTRACT AS 1/4 OF 1% OF THE CONTRACT PRICE.

THIS CONTRACT IS SUBJECT TO A USER ACCESS FEE UNDER THE COUNTY USER ACCESS PROGRAM (UAP) IN THE AMOUNT OF TWO PERCENT (2%). THE VENDOR PROVIDING GOODS AND SERVICES UNDER THIS CONTRACT SHALL INVOICE THE CONTRACT PRICE AND SHALL ACCEPT AS PAYMENT THEREOF THE CONTRACT PRICE LESS THE 2% UAP AS FULL AND COMPLETE PAYMENT FOR THE GOODS AND/OR SERVICES SPECIFIED ON THE INVOICE. THE COUNTY SHALL RETAIN THE 2% UAP FOR USE BY THE COUNTY TO HELP DEFRAY THE COST OF THE PROCUREMENT PROGRAM. VENDOR PARTICIPATION IN THIS INVOICE REDUCTION PORTION OF THE UAP IS MANDATORY.

THIS IS A BLANKET PURCHASE ORDER COVERING PERIOD FROM 02/01/2016 TO 01/31/2021. DELIVERIES AGAINST THIS PURCHASE ORDER SHALL BE MADE IN QUANTITIES AND TIMES AS REQUESTED BY THE DEPARTMENT DURING SAID CONTINUED, NEXT PAGE

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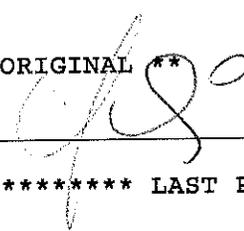
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\*\* ORIGINAL \*\*

PERIOD. INVOICING SHALL BE ON A PER ORDER (DELIVERY) BASIS OR ON A MONTHLY INVOICE BASIS. ALL ITEMS IN ACCORDANCE WITH THE BID PROVISIONS AND SPECIFICATIONS AND THE VENDOR'S QUOTE OR BID. ESTIMATED QUANTITIES AND/OR DOLLARS ARE FOR RECORD PURPOSES ONLY. NO GUARANTEE IS EXPRESSED OR IMPLIED AS TO QUANTITIES AND/OR DOLLARS THAT WILL ACTUALLY BE PURCHASED. THE VENDOR ACCEPTS ALL RISKS ASSOCIATED WITH USING THIS INFORMATION.

\*\* ORIGINAL \*\*

AUTHORIZED SIGNATURE: \_\_\_\_\_



DATE: \_\_\_\_\_

1/20/16

\*\*\*\*\* LAST PAGE \*\*\*\*\*