MIAMI-DADE COUNTY
BLANKET PURCHASE ORDER

BPO ID: ABCW1200195 PRINT DATE: 01/04/2012 PAGE: 01

** ORIGINAL **

VENDOR ID: 650336721
ANIMATED DISPLAY SYSTEMS INC

14580 GLOBAL PARKWAY SUITE 110

FORT MYERS FL 33913

PRIME VENDOR SET ASIDE :
SUBVENDOR GOAL : 00%

PRIME VENDOR COMMITMENT: 00%

SHIP TO:
AS SPECIFIED ON INDIVIDUAL ORDERS

PLEASE REFER ALL QUESTIONS
CONCERNING THIS ORDER TO:
BIANCA ROIG
(305) 375-4725

ITB ID	EXPR DATE	DISCOUNT TERMS	CONTRACT AMOUNT
	12/31/2012	NET30	18,200.00

BID NUMBER
IB8874-2/12-2

ITEM	COMMODITY ID	U/M	UNIT COST
001	936-74		

MAINTENANCE AND REPAIR OF SIGNS, MESSAGECENTERS, S

---------- END OF ITEM LIST ----------

AUTHORIZED DEPTS/USERS

AUTHORIZED DEPT: SP******

CALLER ID	CALLERS NAME	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
********		$18,200.00	( ) -

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

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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 1/1/2012 TO 12/31/2012 DELIVERIES AGAINST THIS PURCHASE ORDER SHALL BE MADE IN QUANTITIES AND TIMES AS REQUESTED BY THE DEPARTMENT DURING SAID PERIOD. INVOICING SHALL BE ON A PER ORDER (DELIVERY) BASIS OR ON A MONTHLY INVOICE BASIS. ALL ITEMS IN ACCORDANCE WITH 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: 1/5/12

******** LAST PAGE ********