

**PURCHASE ORDER / VOUCHER**

**VILLAGE OF TUXEDO PARK**

80 LORILLARD ROAD  
 P.O. BOX 31  
 TUXEDO PARK, NY 10987  
 Phone: (845) 351-4745 - Fax: (845) 351-2668

ABSTRACT	
NUMBER _____	P.O. NUMBER _____
(CLAIMANT - DO NOT WRITE IN THIS AREA)	28116
<b>FUND - APPROPRIATION</b>	<b>AMOUNT</b>
5130.20 Machinery Equip	\$65,377.95
<b>TOTAL:</b>	\$65,377.95

**Department:** \_\_\_\_\_ General \_\_\_\_\_

VENDOR  
 (CLAIMANT'S)  
 NAME  
 AND  
 ADDRESS

Robert Green Truck Division  
 Rt. 17 East Exit 107  
 P.O. Box 8002  
 Rock Hill, NY 12775

Purchase Order Not Valid Until  
 Approved and Signed By  
 Department Head.

Date: 1-17-25  
 \_\_\_\_\_  
 (Signature)

Vendor's Federal I.D. #: \_\_\_\_\_  
 Vendor Assigned CUSTOMER ACCOUNT #: \_\_\_\_\_

DATE	VENDOR'S INVOICE NO.	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	Amount
			Approved at January 15, 2025 Village of Tuxedo Park Board of Trustee Meeting		
1/16/25			2025 Chevrolet 2500HD #0010808 with specifications attached		\$65,377.95
			Financing options from Robert Green Trucking Division to follow		
				<b>TOTAL</b>	<b>\$65,377.95</b>

**CLAIMANT'S CERTIFICATION**

I, \_\_\_\_\_, certify that the above account in the amount of \_\_\_\_\_ is true and correct; that the items, services and disbursements charged were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied; that taxes from which the municipality is exempt, are not included; and that the amount claimed is actually due.

\_\_\_\_\_  
 Date SIGNATURE Title

( SPACE BELOW FOR MUNICIPAL USE )

**DEPARTMENT APPROVAL**

The above services or materials were rendered or furnished to the municipality on the dates stated and the charges are correct.

\_\_\_\_\_  
 DATE AUTHORIZED OFFICIAL

**APPROVAL FOR PAYMENT**

This claim is approved and ordered paid from the appropriations indicated above.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 DATE AUDITING BOARD

