Batch: 368548

U.S. GOVERNMENT

PURCHASE ORDER—INVOICE—VOUCHER

DATE OF ORDER: 11/19/2001

ORDER NO.: 22022988M50

PRINT NAME AND ADDRESS OF SELLER (Number, Street, City, and State) *

PAYEE

PEPCO
PO Box 2826
Mobile, AL 36652

FURNISH SUPPLIES OR SERVICES TO (Name and address)

Office In Charge 08130332
USCG Station
751 Aquarium Dr
Dauphin Island, AL 36528

SUPPLIES OR SERVICES	QUANTITY	UNIT PRICE	AMOUNT
Gasoline	350	.9785	340.38
Diesel	1150	.7555	868.83

AGENCY NAME AND BILLING ADDRESS *

PAYOR

COMMERCIAL INVOICES
USCG FINANCE CENTER
PO BOX 4115
CHESAPEAKE, VA 23327-4115

TOTAL 1209.21

DISCOUNT TERMS

_____% _____ DAYS

DATE INVOICE RECEIVED

ORDERED BY (Signature and title)

BM1, XPO

PURPOSE AND ACCOUNTING DATA

7/8/101/108/3010/A335/30332/2637

PURCHASER—To sign below for over-the-counter delivery of items

RECEIVED BY: BM1

TITLE: XPO

DATE: 11/19/2001

SELLER—Please read instructions on Copy 2

☐ PAYMENT RECEIVED $_____

☐ PAYMENT REQUESTED $_____

NO FURTHER INVOICE NEED BE SUBMITTED

SELLER BY _____ (Signature)

DATE: 11/19/2001

INSTRUCTIONS TO SELLER

After satisfactory identification of the Government representative presenting this purchase order, verify the itemization, including quantity, unit price, amount, total and discount sections.

This form is so designed that Copy 1 may be used as a cash payment receipt or as your invoice by completing, as appropriate, either the Payment Received or Payment Request blocks and signing the Seller Section.

If you would rather submit your own invoice, DO NOT SIGN COPY 1, but attach it unsigned to your invoice to expedite verification and processing for payment.

2. SELLER'S COPY OF ORDER

STANDARD FORM 44b (Rev. 10-83)
PRESCRIBED BY GSA,
FAR (48 CFR) 53.213(c)

Figure 12D-9a SF-44, Purchase Order - Invoice – Voucher
Open Market Purchase

Page 30/39 received at 5/7/2004 1:18:50 PM [Eastern Daylight Time] on server CCO-RF-W-2/1 CSID-3055911769 Duration 30:52 Un

PURCHASE ORDER—INVOICE—VOUCHER

DATE OF ORDER: 4/13/04

ORDER NO.: Z-13429-4104-SK138

PRINT NAME AND ADDRESS OF SELLER (Number, Street, City, and State)*

PAYEE: BV OIL, 7950 NW 58TH STREET
MIAMI FL 33166

FURNISH SUPPLIES OR SERVICES TO (Name and address)*

CGC SITKINAK, 100 MACARTHUR CSWY
MIAMI BEACH FL 33139

SUPPLIES OR SERVICES	QUANTITY	UNIT PRICE	AMOUNT
DFM ITEM 216-752	6523	@	6940.47

AGENCY NAME AND BILLING ADDRESS*

DFAS COLUMBUS CENTER
FUELS ACCT & PAYMENT CTR DIV
ATTN BVDFB ICC POB 182317
COLUMBUS OH 43218

TOTAL 6940.47

DISCOUNT TERMS ..... % ..... DAYS

DATE INVOICE RECEIVED 4/13/04

ORDERED BY (Signature and title)

Albie D. Ervin, CWO

PURPOSE AND ACCOUNTING DATA

BKH SP0600-02-D-0099
DESCH 97X4930 5CFO 01.26.1 533150
2/7/XF6/107/SK/0/85/13429/2639

PURCHASER—To sign below for over-the-counter delivery of items

RECEIVED BY: Albie D. Ervin

TITLE: SUPPO

DATE: 4/13/04

SELLER—Please read instructions on Copy 2

☐ PAYMENT RECEIVED $.....

☒ PAYMENT REQUESTED $ 6940.47

NO FURTHER INVOICE NEED BE SUBMITTED

SELLER

BY ..... (Signature)

DATE

I certify that this account is correct and proper for payment in the amount of

$.....

..... (Authorized certifying officer)

DIFFERENCES

ACCOUNT VERIFIED; CORRECT FOR

BY .....

PAID BY ☐ CASH

OR ..... (Check No.)

DATE PAID

VOUCHER NO.

* PLEASE INCLUDE ZIP CODE

1. SELLER'S INVOICE (See Instructions on Copy 2)

STANDARD FORM 44a (Rev. 10-83) PRESCRIBED BY GSA FAR (48 CFR) 53.213(c)

Figure 12D-9b SF-44, Purchase Order - Invoice – Voucher Bunkers Fuel