

## Contract Summary Sheet

**Contract (PO) Number:** 2255

**Specification Number:** 10281

**Name of Contractor:** LEEWAY WRECKING, INC.

**City Department:** DEPARTMENT OF BUILDINGS

**Title of Contract:** COURT ORDERED CLASS "D" DEMOLITION - 4721 W. SUPERIOR STREET - 2 STORY - BRICK BUILDING

**(Term of Contract is not applicable)**

**Dollar Amount of Contract (or maximum compensation if a Term Agreement):**

\$3,548.00

**Brief Description of Work:** COURT ORDERED CLASS "D" DEMOLITION - 4721 W. SUPERIOR STREET - 2 STORY - BRICK BUILDING

**Procurement Services Contact Person:** CAROLYN SAMMONS

**Vendor Number:** 1053801

**Submission Date:**

**AUG 06 2003**

UNTITLED

**CITY OF CHICAGO  
STANDARD PURCHASE ORDER**

Furnish the supplies and/or services described below in conformance with conditions set forth herein and in your offer.

DATE OF AWARD	DEPARTMENT NUMBER	PURCHASE ORDER	SPECIFICATION NUMBER	VENDOR NUMBER	SITE NAME	DELIVERY DATE	PAGE NUMBER
IN PROCESS	67	2255	10281	1053801	A		1

**DELIVER TO:**

127  
CITY HALL- ROOM 501  
121 NORTH LASALLE STREET  
CHICAGO ILLINOIS 60602

**ORDERED FROM:**

LEEWAY WRECKING, INC.  
P.O. BOX 12570  
CHICAGO, IL 60612

DELIVERY CHARGES to be PREPAID  
TITLE TO PASS ON DELIVERY

**BUYER:** 34852 CAROLYN SAMMONS

**PO DESCRIPTION:** COURT ORDERED CLASS "D" DEMOLITION - 4721 W. SUPERIOR STREET - 2 STORY - BRICK BUILDING

PO Line	Ship Line	COMMODITY INFORMATION	QUANTITY	UOM	UNIT COST	TOTAL COST							
12	1	96832 4721 W. SUPERIOR ST.	1	Job	3,548.00	3,548.00							
		Dist	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	TOTAL COST
		1	002	0463	0672005	4113	220540	0000	60046151	000000	00000	0000	3,548.00
<b>PO LINE and SHIPMENT LINE TOTAL:</b>												<b>3,548.00</b>	

**PURCHASE ORDER TOTAL: 3,548.00**

I hereby certify that this purchase is in agreement with the requisition on file authorizing the expenditure and is properly approved.

Purchasing Agent David E. Malone Date 7-21-03

I hereby certify that the amount of this order is fully covered by an encumbered balance in the budgetary account designated above.

Comptroller Tang A. Malhanee Date 7/29/03

Payment on this order will be made upon receipt of an original vendor invoice form referencing this order.

Submit the original invoice to the department referenced above.

Mark all packages and papers with the purchase number.

Any deliveries containing overshipments will be reflected unless otherwise authorized in this purchase.

This purchase is subject to the City of Chicago General Conditions for Supplies, Work, or Professional Consulting Services; Special Conditions, Disclosure Ownership, Acceptance Page, as applicable, which are attached hereto or incorporated herein by reference.