



Town of Vienna
Accounts Payable

Purchase Order

Fiscal Year 2018

Page 1 of 1

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKAGES AND SHIPPING PAPERS.

Purchase Order # **20180348-00**

B I L L T O

AP
VIENNA TOWN HALL
ACCOUNTS PAYABLE
127 CENTER STREET S
VIENNA VA 22180

Delivery must be made within
doors of specified destination.

V E N D O R

BRIGLIA AND HUNDLEY P C
1921 GALLOWS ROAD
SUITE 750
VIENNA VA 22182

S H I P T O

VIENNA TOWN HALL
127 CENTER STREET S
VIENNA VA 22180

Vendor Phone Number	Vendor Fax Number	Requisition Number	Delivery Reference
703-883-0880		18000372	

Date Ordered	Vendor Number	Date Required	Freight Method/Terms	Department/Location
11/21/2017	279			LEGAL SERVICES

Item#	Description/Part No.	Qty	UOM	Unit Price	Extended Price
1	<p>THIS IS A CONFIRMATION supplemental The Above Purchase Order Number Must Appear On All Correspondence - Packing Sheets And Bills Of Lading</p> <p>SUPP LEG SVCES RESERVE 100-102-1021-11221-43114- \$13,872.25 PER TERMS, CONDITIONS AND SPECIFICATIONS ON INVOICE B13-243V</p>	1.0	LS	\$13,872.250	\$13,872.25

By *Meriam Shepin*
Purchasing Agent

PURCHASING COPY

Total Ext. Price	\$13,872.25
PO Total	\$13,872.25

TOWN OF VIENNA

Request For Waiver

\$13,872.25 nu

Req #	Dept	Date	Dept Head Signature	Proposed Vendor	Amount
	<i>Legal</i>	<i>11/17/17</i>	<i>[Signature]</i>	<i>Brightline Technology</i>	<i>\$20,000</i>
<p>A Request For Waiver is required by the Town's Procurement Policies and Procedures. Check the box below that applies to the proposed purchase.</p>					
Sole Source/Proprietary		<input checked="" type="checkbox"/>	Emergency Procurement	<input type="checkbox"/>	Waive Purchase Procedures
					<input type="checkbox"/>

[Signature]

CHECK JUSTIFICATION(S) BELOW THAT APPLY TO THE PROPOSED PURCHASE AND SUPPLY DOCUMENTATION/EXPLANATION AS REQUIRED

- 1. Commodity/Service is from the original manufacturer or provider. There are no other distributors. (Findings must be documented below or attached)
- 2. The product is an integral part of existing equipment. Other brands not interchangeable. (State manufacturer and model number of existing equipment below.)
- 3. Only known product that meets the specialized needs of the department to bring about continuity of results. (Explain in detail below or attached)
- 4. Staff has had extensive training and/or experience with the product. Purchase of other than proposed product would incur substantial cost in re-training. (Explain in detail below or attached)
- 5. Purchase of this item/service is of an urgent nature because it is essential to public health & safety. (Describe in detail below)
- 6. Unable to obtain 3 or more quotes for item/service (Explain in detail below or attached)
- 7. None of the above apply. (State justification below and explain in detail)

Explanation:

The Town Attorney's contract allows his firm to charge the Town for supplemental legal expenses incurred by his firm while serving the Town. He invoices for these charges sporadically. A PO has been entered for ~~\$20,000~~ of the \$30,000 budget. This item will go before Council for approval on December 11, 2017.

\$13,872.25 nu
P.O. Actually issued for \$13,872.25,
The amount of the invoice. *[Signature]*

Reviewed by: *[Signature]* Date: *11/17/17* Reviewed by: _____ Date: _____
Purchasing Agent Town Attorney

Reviewed and Approved by: *[Signature]* Date: *11/17/17*
Finance Director

Reviewed and Approved by: *[Signature]* Date: *11/20/17*
Town Manager