



Taro Sue Store

P.O. Box 2745 Saipan MP 96950
TEL: (670) 234-5416
FAX: (670) 235-5415

ING ENTERPRISES, INC. ighting & Sound

P.O. Box 7325 Tamuning Guam 96911
TEL: (671) 649-3324/649-2730 FAX: (671) 472-6652

INVOICE

NO. 01114

CUSTOMER Legislature Office DATE 6/3/15
ADDRESS c/o Mr Jess Lizama TEL. FAY 322 8993
PO#

TERM OF SALES	COD	ON ACCT.	CASH	OTHER	SALESMAN	BRANCH
QTY.	DESCRIPTION			UNIT PRICE	AMOUNT	
1	SOUNDTEK ST162				721	65
1	SHURE SAI 58				1,090	-
10	CANARE soft mic cable			47	470	-
10	MIC stand			32.65	326	50
1/Pr	control SCR JBL				720	-
1/Pr	JBL mount M1152				70	-
soft	speaker cable G14			.75	60	-
				TOTAL	3,458	15
				DEPOSIT		
				BALANCE		

Prepared by: [Signature]
Orders Received by: [Signature]

NO RETURN-NO EXCHANGE

7/11
Pearl

Per our telex, pls
re-issue a new invoice
and be specific. I do
not want my boss to
be criticized at Finance
w/all these invoices.

Thank for your
cooperation. Call me if
you need more info.

Alicia

Installation charges
was not computed correctly.
should be \$720 not \$702.00

Iaro Sue Store



P.O. Box 2745 Saipan MP 96950
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KING ENTERPRISES, INC. Lighting & Sound

P.O. Box 7325 Tamuning Guam 96911
 TEL: (671) 649-3324/649-2730 FAX: (671) 472-6652

INVOICE

NO. 00242

CUSTOMER NAME LEGISLATURE OFFICE		DATE 6-6-95	
ADDRESS C/O JESS LIZAMA		HOME PHONE	WORK PHONE
BRAND NAME		MODEL NO.	SERIAL NO.
DESCRIPTION			
WORK TO BE DONE		RECEIVED BY: <i>[Signature]</i>	

WORK PERFORMED

**REINSTALLATION
 FOR P.A. SYSTEM**

QTY.	PARTS	LIST PRICE	AMOUNT
	16 HRS.	45.00	720.00

WARRANTY

YES
 NO

DATE OF PURCHASE _____

PARTS **\$720.00**
 LABOR **\$720.00**
TOTAL \$720.00

NOTICE: 30 DAYS WARRANTY ON LABOR AND PARTS WITH THE SAME PROBLEM.

INVOICE NO. _____

Completed by: _____ Date: _____

[Signature]
 DATE PICKED-UP _____
 CUSTOMER SIGNATURE

CUSTOMER CLAIM SLIP

I hereby authorize King's Lighting and Sound Service Center to do the repair of equipment stated above, and also I agree to pay all necessary charges for completed job. Unit not claimed within 30 days after the date of notification will be sold to cover the cost of repair. NOTICE: TO ALL CUSTOMERS, We will not release any equipment without your claim slip under any circumstances to protect our valid customers.

CUSTOMER NAME		DATE
BRAND	MODEL	SERIAL
DESCRIPTION		
WORK TO BE DONE		

INVOICE NO. 00242

CUSTOMER SIGNATURE _____ DATE _____

Commonwealth of the Northern Mariana Islands

Office of the Governor

Saipan, MP 96950

CABLE: GOVNOMAR
 Telephone: (670) 664-1500 / 664-1501
 Fax: (670) 664-1515

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES AND DELIVERY SLIPS

No. **P54259 (MANUAL)**

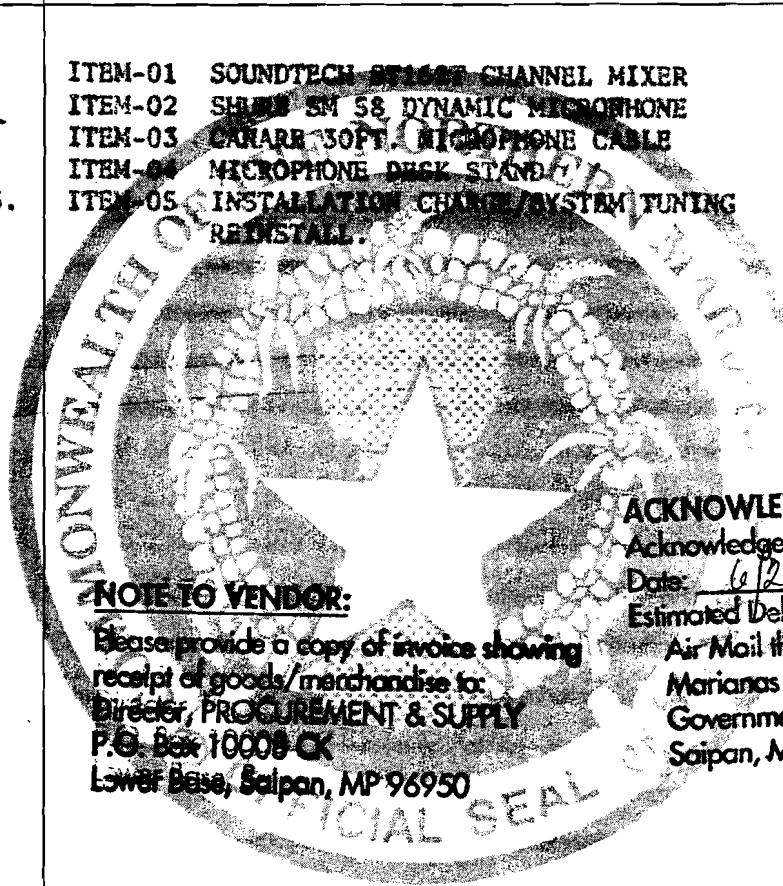
DATE: 05/30/95

VENDOR: TARO SUE STORE
 P.O. BOX 2745
 SAIPAN, MP 96950

1. P.O. number must appear on all invoices, packages, packing lists, and other related documents.
2. Payments requests, prior to receipt of shipment, must include proof of shipment with invoice.
3. The CNMI Government reserves the right to reject any or all items received that are not in compliance with ordered specifications.
4. AIRMAIL original purchase order & original invoice with two duplicate copies to: Director, Procurement & Supply P.O. Box 10008 CK, Saipan, MP 96950. All correspondences with regards to payments must be directed to the above.
5. All correspondence regarding shipment of this order is to be directed to the Director, Procurement & Supply, CNMI.
6. Any refund check should be payable to CNMI treasury mail all refund to the above address.

JOB POINT : SAIPAN
 SHIPPED VIA : VENDOR'S DELIVERY
 DELIVERY TIME: ASAP

QUANTITY	UNITS OF ISSUE	DESCRIPTION	UNIT PRICE	TOTAL PRICE
1.00	PC.	ITEM-01 SOUNDTECH ST1400 CHANNEL MIXER	721.6500	721.65
10.00	PC.	ITEM-02 SHURE SM 58 DYNAMIC MICROPHONE	109.0000	1,090.00
10.00	PC.	ITEM-03 CANARE 30FT. MICROPHONE CABLE	47.0000	47.00
10.00	PC.	ITEM-04 MICROPHONE DESK STAND	32.6500	326.50
16.00	HRS.	ITEM-05 INSTALLATION CHARGE / SYSTEM TUNING REINSTALL.	45.0000	720.00



NOTE TO VENDOR:

Please provide a copy of invoice showing receipt of goods/merchandise to:
 Director, PROCUREMENT & SUPPLY
 P.O. Box 10008 CK
 Lower Base, Saipan, MP 96950

ACKNOWLEDGEMENT COPY

Acknowledged Receipt of this Order
 Date: 6/2/95 By: [Signature]
 Estimated Delivery Date: _____
 Air Mail this copy to:
 Marianas Supply Officer
 Government of the Northern Marianas
 Saipan, MP 96950

DELIVER TO: HARPANDS P54259/1594-6411 RELEASE DATE 05/30/95
 P.O. BOX 10008 C.K. PCC-95-008
 SAIPAN, MP 96950

TOTAL 3,310.15

SHIP VIA: EDWARD B. PALACIOS
 ACKNOWLEDGEMENT DIRECTOR, PROCUREMENT & SUPPLY