

## Contract Summary Sheet

**Contract (PO) Number:** 2050

**Specification Number:** 8197

**Name of Contractor:** NEW HORIZONS COMPUTER LEARNING

**City Department:** DEPARTMENT OF HUMAN SERVICES

**Title of Contract:** ORACLE CERTIFICATION SERIES TEST

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

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

\$5,000.00

**Brief Description of Work:** ORACLE CERTIFICATION SERIES TEST

**Procurement Services Contact Person:** CAROLYN ALCARAZ

**Vendor Number:** 1044606

**Submission Date:**

**SEP 08 2003**

**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	53	2050	8197	1044606	A		1

**DELIVER TO:**

053-2005 CDHSCNTOFF  
1615 W. CHICAGO AVE.  
2ND, 3RD FLOORS  
Chicago, IL 60622

**ORDERED FROM:**

NEW HORIZONS COMPUTER LEARNING  
8550 W. BRYN MAWR 4TH FLOOR  
CHICAGO, IL 60631

DELIVERY CHARGES to be PREPAID  
TITLE TO PASS ON DELIVERY

**BUYER:** 18901 CAROLYN ALCARAZ 312-744-9776

**PO DESCRIPTION:** ORACLE CERTIFICATION SERIES TEST

PO Line	Ship Line	COMMODITY INFORMATION						QUANTITY	UOM	UNIT COST	TOTAL COST
1	1	92420						40	Each	125.00	5,000.00
ORACLE CERTIFICATION SERIES TEST											
Dist	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	TOTAL COST
1	003	0100	0532005	0140	220140	0000	00000000	000000	00000	0000	5,000.00
PO LINE and SHIPMENT LINE TOTAL:											5,000.00
PURCHASE ORDER TOTAL:											5,000.00

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 8-14-03

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

Comptroller Terry H. Malhance Date 8/20/03

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.