

AGENDA ITEM FOR ADMINISTRATIVE MEETING

() Discussion only
(X) Action

FROM (DEPT/ DIVISION): Douglas R. Olsen
County Counsel

SUBJECT: Maintenance Payable – Chiller Repair

<p>Background: Maintenance is requesting payment for repairs to the Stafford Hansell Government Center chiller. Due to the amount, payment is before the Board for approval.</p>	<p>Requested Action: Approve payment to HMS Commercial Service in amount of \$6,402.</p>
--	--

ATTACHMENTS: Payable

*****For Internal Use Only*****

Checkoffs:

- () Dept. Head (copy)
- () Budget (copy)
- () Fiscal
- (X) Legal (copy)
- () (Other - List:)

To be notified of Meeting:
Robert Pahl, Mark Tanner

Needed at Meeting:

Scheduled for meeting on: July 21 , 2021

Action taken:

Olsen 7/19

UMATILLA COUNTY PAYMENT REQUEST

PEID - AC 14254-01
NAME HMS COMMERCIAL SERVICE, INC.
ADDRESS PO BOX 50245
BELLEVUE, WA 98015
CITY, STATE, ZIP

AUTHORIZATION-APPROVAL

DEPARTMENT CFO
SUBMITTED 7/7/2021
RETURN - HOLD

AMOUNT	ACCOUNT #	DESCRIPTION	INVOICE NUMBER	INVOICE TOTAL	INVOICE DATE	FINANCE CODES
\$6,402.00	6020-53400	Replace Crankcase & Sensors	317937	\$6,402.00	06/30/21	
		Chiller Unit				

PAGE TOTAL \$6,402.00
Office Use: Pretravel/Auth rec: _____ **Contract Reviewed:** _____ **Routine:** _____
Office Use: Tax ID Reviewed: _____ **Quotes:** _____ **Bids:** _____

Invoice

HMS COMMERCIAL SERVICE, INC.

4103 SE International Way
Suite 300
Milwaukie OR 97222
503-220-0394 FAX: 503-841-6245

Invoice # 317937
Date: 6/30/2021
Page # 1 of 1

Account # 100499

UMATILLA COUNTY COURTHOUSE
216 SE FOURTH STREET
PENDLETON OR 97801

Service At:
STAFFORD HANSELL GOVERNMENT
CENTER
915 SE COLUMBIA
HERMISTON OR 97838

Service Date 6/25/2021 PO #20 Job #244114 Contract # Claim #

COMPLETED REPAIRS ON CHILLER. VERIFIED OPERATION OF CHILLER.

Description Of Service	Quantity	Unit Price	Extended Price	Tax
REPLACE CRANKCASE HEATERS & SENSORS ON CHILLER	1	\$6,402.00	\$6,402.00	

Balance Due \$6,402.00

Building Code 20
Object Code 53400
Remodel Dept _____
Approved MF

Terms: Due 7/30/2021

Please pay from this Invoice

Please Detach and Return with Remittance

Check Enclosed []	Method of Payment
Master Card [] Visa []	
Acct # _____	Exp Date _____
Name on Card _____	
Signature _____	

Invoice # 317937
Date : 6/30/2021
Account # 100499

UMATILLA COUNTY COURTHOUSE

Remit To:

HMS COMMERCIAL SERVICE, INC.
P.O. BOX 50245
Bellevue WA 98015

Amount Due

Amount Paid