



FORM  
FIN1510-01

For Accounts Payable Use Only

<b>Vendor Number</b>
54001

# CHECK REQUEST FORM

Use this form to arrange for payment to individuals or businesses when a Purchase Order or P-card is not required.

**This form must be submitted in typed format only.**

Vendor Information						
<b>Vendor or Employee Name</b>		<b>Date</b> 1.22.21				
Disys						
		If payment is to a Vendor, is a W-9 on file in the Purchasing Office? Y				
<b>Mailing Address</b>		If No, a completed W-9 MUST be attached. Email Meagan Porch in our Purchasing Division.				
44670 Cape Court, Suite 100						
Ashburn, VA 20147						
<b>Email Address</b>		meagan.porch@rockdalecountyga.gov				
EXPENSE/ACCOUNT DETAILS						
Description (for individuals, Services, Expense Reimbursements)	Date of Service or Invoice	General Ledger Account				Amount
		Fund	Function	Account	Dept.	
Catalyst 9300 24-Port Network Advantage	11.13.20	100	1400	531600	2	\$6,799.82
Catalyst 9300 8X10GE Network Module	11.13.20	100	1400	531600	2	\$4,222.23
Catalyst 9300 24-Port POE+	11.13.20	100	1400	531600	2	\$5,758.29
DNA Advantage 24-Port 5 Year Term	11.13.20	100	1400	531600	2	\$5,546.85
<b>*To be paid from 2020 Budget</b>						
<b>Total Check Amount</b>						<b>\$22,327.19</b>
DESCRIBE FULLY THE NATURE OF THE PAYMENT						
For Network Switches provided to the BOE for Elections. Invoice IN18424						
SIGNATURES/APPROVALS						
<b>Dept. Designee</b>	<b>Date</b>	<b>Director of Finance</b>			<b>Date</b>	
Megan Moore-Jordan	4/25/21					
<b>Staff Accountant</b>	<b>Date</b>	<b>Purchasing</b>			<b>Date</b>	
		Jenna Malone			1/26/2021	
CHECK HANDLING INSTRUCTIONS						
<b>5. Mail</b>	<b>6. Pick Up-Approval by Finance Director</b>			<b>7. Send Inter-Department Mail</b>		
(Enclose attachments if required in letter size envelope)	Available at the Finance Office Front Desk after 2:00 pm every Friday			Will be placed in mailbox after 2:00 p.m every Friday		

Please send this form with attachments to the Department of Finance. Each check request received Monday-Friday will be processed the following Friday.

2021-82



**Invoice IN18424**

**Invoice Date Nov 13, 2020**

**Disys Solutions Inc (DSI)**  
**44670 Cape Court, Suite 100**  
**Ashburn VA 20147**  
**PH: 571-707-3636 FAX: 1-800-601-2944**  
**www.dsitech.com**

**Bill To:**  
 Rockdale County  
 PO Box 289  
 Conyers, GA 30012  
 USA

**Ship To:**  
 Rockdale County  
 1329 Portman Dr.  
 Suite A  
 Management Information Systems  
 Conyers, GA 30094  
 USA

Customer	Ship Via	F.O.B		Terms		
503221				Net 30 Days		
Purchase Order Number		Salesperson		Order Date	Our Order Number	
ASTINSON10162020		JV01		Oct 16, 2020	OR61036	
Quantity Ordered	Quantity Shipped	Item Number	Unit of Measure	Unit Price		Extended Price
	Back Ordered	Item Description		Discount %	Tax	
3.0000	3.0000	C930024PA	EACH	2,266.60500		6,799.82
	0.0000	Catalyst 9300 24-port PoE+, Network Advantag			Y	
3.0000	3.0000	C9300NM8X	EACH	1,407.41000		4,222.23
	0.0000	Catalyst 9300 8 x 10GE Network Module			Y	
1.0000	1.0000	SHIPCHARGE	EACH	0.00000		0.00
	0.0000	SHIPPING AND HANDLING CHARGES			Y	
3.0000	3.0000	CONSNTC93002PA	EACH	1,919.43000		5,758.29
	0.0000	SNTC-8X5XNBD Catalyst 9300 24-port PoE+, I			Y	
3.0000	3.0000	C9300DNAA245Y	EACH	1,848.95000		5,546.85
	0.0000	C9300 DNA Advantage, 24-Port, 5 Year Term L			Y	

RMA Policy: 20% RESTOCKING ON ALL RETURNS.  
 Customer must get approval and RMA number from DSI.  
 Software is not returnable. No returns after 30 days.  
 Call DSI for further information on RMA policy

Net Due on Dec 13, 2020

**Wire/ACH Transfer:**

JP Morgan Chase Bank, N.A.  
 4 New York Plaza, Floor 15, Mailcode : NY1-E050  
 New York, NY 10004-2413  
 Account# 329381377  
 Routing/Transit# 021000021(NY)

Duns # 962751918  
 Fein # 27- 2586114  
 Cage Code # 674Q4

**Remit to Address:**  
 Disys Solutions Inc (DSI)  
 44670 Cape Court, Suite 100  
 Ashburn VA 20147

<b>Subtotal</b>	<b>22,327.19</b>
<b>Total sales tax</b>	<b>0.00</b>
<b>Total invoice</b>	<b>22,327.19</b>
<b>Paid Amount</b>	<b>0.00</b>
<b>Amount due</b>	<b>22,327.19</b>