



RESEARCH CORPORATION
OF THE UNIVERSITY OF GUAM

PURCHASE ORDER ADJUSTMENT

DATE: 07/30/21

TO: Ms. Gloria Travis, RCUOG Chief Business Officer

FROM: *[Signature]* Jul 30, 2021, CNAS *Aubrey Moore* Jul 30, 2021
Jul 30, 2021 UNIT DIRECTOR'S Name/Signature UNIT'S NAME



Approved



Disapproved

Subject: Adjustment of Encumbrances

Your immediate action is hereby requested to adjust the following:

PO No. PR210637 ACCOUNT No.: 30-2F-311117-R-5201050

VENDOR Name: ATKINS KROLL

1. ☐ INCREASE ☒ DECREASE
AMOUNT: From \$ 3,165.87 To \$ 1,340.35 ADJUST \$ 1,825.52
2. ☐ CHANGE OF VENDOR
From: See above To: _____
3. ☐ CANCEL in its entirety.
4. ☐ CANCEL the balance \$ _____ and consider the purchase order closed.
5. ☐ Other: _____

JUSTIFICATION/REASON:

The vendor needs an update of the Purchase Order with the corrected amount of the total of invoice.

~~~~~ INFORMATION TO BE COMPLETED BY BUSINESS OFFICE AFTER THIS LINE ~~~~~

Procurement Adjustment No. \_\_\_\_\_

Certifying Officer: *[Signature]*

Date 8/3/21

Copies: Procurement/Accounting/Units

**(DO NOT USE FOR CONTRACT ADJUSTMENTS)**

UOG Station, Mangilao, Guam 96923 Tel. (671) 735.2925 Fax. (671) 734.3118  
A U.S. Land Grant Institution accredited by the Western Association of Schools and Colleges  
The University of Guam is an equal opportunity provider and employer.

ENCUMBERED (Date & Initial)  
8/2/21

RCUOG

RECEIVED

DATE: 8/2/21

CUSTOMER #: 722852  
UNIT# N

1028811

\*INVOICE\*



Service Department

Atkins Kroll, Inc.  
443 South Marine Dr.  
Terrebonne, LA 70063  
Tel: (871) 648-1886 Fax: (871) 648-6429  
www.atkinskroll.com

UNIVERSITY OF GUAM CNAS

UOG STATION

MANGILAO, GU 96923

HOME: 671-735-2991

BUS: 671-488-3048

CONT: 671-488-3048

CELL: 671-487-0056

PAGE 1

SERVICE ADVISOR: 117 RHAISHAN DONGZA

|              |            |                    |                         |                                       |                                 |         |           |  |
|--------------|------------|--------------------|-------------------------|---------------------------------------|---------------------------------|---------|-----------|--|
| 671-488-3048 |            | CELL: 671-487-0056 |                         | SERVICE ADVISOR: 117 KHAYSEAN DONGTHA |                                 |         | TAG       |  |
| COLOR        | YEAR       | MAKE/MODEL         | VIN                     | LICENSE                               | MILEAGE IN/OUT                  |         | TAG       |  |
| 040          | 10         | TOYOTA TACOMA 4X4  | 5TELU4EN3AZ723047       | 5459                                  | 117548/117548                   |         | T5172     |  |
| DEL DATE     | PROD. DATE | WARR. EXP.         | PROMISED                | PO NO.                                | RATE                            | PAYMENT | INV. DATE |  |
| 08FEB10      | DD01DEC09  |                    | 17:00 28JUL21           |                                       | 121.00                          | CASH    | 28JUL21   |  |
| R.O. OPENED  |            | READY              | OPTIONS:                |                                       | SOLD-STK:T10435010 DLR:AK-SALES |         |           |  |
|              |            |                    | ENG:8558109 TRN:A AXLTN |                                       |                                 |         |           |  |

| LINE   | OPCODE                                    | TECH                             | TYPE                | HOURS | LIST  | NET    | TOTAL  |
|--------|-------------------------------------------|----------------------------------|---------------------|-------|-------|--------|--------|
| A      | "FREE"                                    | VISUAL HEALTH CHECK              |                     |       |       |        |        |
|        | VHC                                       | "FREE"                           | VISUAL HEALTH CHECK |       |       | 0.00   | 0.00   |
|        | 206                                       | IT                               | 0.20                |       |       |        |        |
| 117548 | PERFORM VHC                               |                                  |                     |       |       |        |        |
| B      | CUT AND REPROGRAM ONE KEY                 |                                  |                     |       |       |        |        |
|        | 314T                                      | STARTING SYSTEM DIAGNOSIS        |                     |       |       | 302.50 | 302.50 |
|        | 206                                       | CT                               | 2.50                |       | 45.63 | 41.07  | 41.07  |
|        | 1                                         | 89785-08020 TRANSMITTER, TRANSPO |                     |       | 50.00 | 50.00  | 50.00  |
|        | 1                                         | BARNES KEY CUT                   |                     |       |       |        |        |
| 117548 | RESET IMMOBILIZER ECU & CUT KEY & PROGRAM |                                  |                     |       |       |        |        |

C-USD

NOTE :

206 IT 0.00

0.00 0.00

EST: 302.50

28JUL21 14:18 SA: 117

CONTACT:

EST: 121.00

28JUL21 09:28 SA: 117

CONTACT:

\*\*\*\*\*



On behalf of servicing dealer, I hereby certify that the information contained herein is accurate unless otherwise shown. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any accident, negligence, or misuse. Records supporting this claim are available for 11 year from the date of payment notification at the servicing dealer for inspection by manufacturer's representative.

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this merchandise. The seller hereby expressly disclaims all warranties, other express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this merchandise.

Customer Name (PRINT)

DATE

CUSTOMER SIGNATURE

SIGNATURE DEALER GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

| DESCRIPTION            | TOTALS |
|------------------------|--------|
| LABOR AMOUNT           | 302.50 |
| PARTS AMOUNT           | 91.07  |
| GAS, OIL, LUBE         | 0.00   |
| SUBLET AMOUNT          | 0.00   |
| MISC. CHARGES          | 0.00   |
| TOTAL CHARGES          | 393.57 |
| LESS INSURANCE         | 0.00   |
| G.R.T.                 | 0.00   |
| PLEASE PAY THIS AMOUNT | 393.57 |

CUSTOMER COPY



CUSTOMER #: 722852

1028812



## Service Department

 Atkins Kroll, Inc.  
 443 South Marine Dr.  
 Tamuning, Guam 96913

 Tel (671) 848-1888 Fax (671) 848-8429  
 www.ajkguam.com

UNIVERSITY OF GUAM CNAS

UOG STATION

MANGILAO, GU 96923

HOME: 671-735-2991 CONT: 671-488-3048

BUS: 671-488-3048 CELL: 671-487-0056

\*INVOICE\*

PAGE 1

SERVICE ADVISOR: 117 RHAISSAN DONEZA

|               |  |               |                 |                                          |                   |        |         |                |           |       |
|---------------|--|---------------|-----------------|------------------------------------------|-------------------|--------|---------|----------------|-----------|-------|
| COLOR         |  | YEAR          | MAKE/MODEL      |                                          | VIN               |        | LICENSE | MILEAGE IN/OUT |           | TAG   |
| 1F7           |  | 10            | TOYOTA 4 RUNNER |                                          | JTEBU5JR4A5009906 |        | 5605    | 50134/50134    |           | T5170 |
| DEL DATE      |  | PROD DATE     | WARR. EXP.      | PROMISED                                 |                   | PO NO. | RATE    | PAYMENT        | INV. DATE |       |
| 14DEC09       |  | 01DEC09       |                 | 17:30 28JUL21                            |                   |        | 121.00  | CASH           | 28JUL21   |       |
| R.O. OPENED   |  | READY.        |                 | OPTIONS: SOLD-STK:T10441010 DLR:AK-SALES |                   |        |         |                |           |       |
| 09:29 28JUL21 |  | 15:24 28JUL21 |                 | ENG:1GRA067351 TRN:A AXU:273786576       |                   |        |         |                |           |       |

| LINE  | OPCODE  | TECH                | TYPE                | HOURS | LIST | NET  | TOTAL |
|-------|---------|---------------------|---------------------|-------|------|------|-------|
| A     | "FREE"  | VISUAL HEALTH CHECK |                     |       |      |      |       |
|       | VHC     | "FREE"              | VISUAL HEALTH CHECK |       |      |      |       |
|       |         | 206                 | IT                  | 0.20  |      | 0.00 | 0.00  |
| 50134 | PBRFORM | VHC                 |                     |       |      |      |       |

## B CUT AND REPROGRAM KEY

314T STARTING SYSTEM DIAGNOSIS

206 CT 1.00

1 89070-35170 TRANSMITTER ASSY DO

1 BARNES KEY CUT

50134 CUT KEY &amp; PROGRAM

|        |        |        |
|--------|--------|--------|
| 278.46 | 121.00 | 121.00 |
| 50.00  | 250.61 | 250.61 |
|        | 50.00  | 50.00  |

EST: 121.00

28JUL21 09:29 SA: 117

CONTACT:

SHUTTLE



TOYOTA



LEXUS

On behalf of servicing dealer, I hereby certify that the information contained herein is accurate unless otherwise shown. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any accident, negligence, or misuse. Records supporting this claim are available for (1) year from the date of payment notification at the servicing dealer for inspection by manufacturer's representative.

## STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item.

Customer Name (PRINT)

DATE

(SIGNED) DEALER GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE

| DESCRIPTION            | TOTALS |
|------------------------|--------|
| LABOR AMOUNT           | 121.00 |
| PARTS AMOUNT           | 300.61 |
| GAS, OIL, LUBE         | 0.00   |
| SUBLET AMOUNT          | 0.00   |
| MISC. CHARGES          | 0.00   |
| TOTAL CHARGES          | 421.61 |
| LESS INSURANCE         | 0.00   |
| G.R.T.                 | 0.00   |
| PLEASE PAY THIS AMOUNT | 421.61 |

CUSTOMER COPY



CUSTOMER #: 722852

1028814

\*INVOICE\*



Service Department

Atkins Kroll, Inc.

443 South Marine Dr.

Tammunig, Guam 96813

Tel (671) 646-188618 Fax (671) 646-8429

www.krollguam.com

UNIVERSITY OF GUAM ~~CHAS~~

UOG STATION

MANGILAO, GU 96923

HOME: 671-735-2991 CONT: 671-488-3048

BUS: 671-488-3048 CELL: 671-487-0056

DUPLICATE 1

PAGE 1

SERVICE ADVISOR: 117 RHATSSAN DONEZA

|             |  |            |  |                                            |  |                   |  |         |  |                |  |         |  |          |  |
|-------------|--|------------|--|--------------------------------------------|--|-------------------|--|---------|--|----------------|--|---------|--|----------|--|
| COLOR       |  | YEAR       |  | MAKE/MODEL                                 |  | VIN               |  | LICENSE |  | MILEAGE IN/OUT |  | TAO     |  |          |  |
| 1F7         |  | 10         |  | TOYOTA 4 RUNNER                            |  | JTRBU5JRXA5006573 |  | 5603    |  | 99261/99261    |  | T5169   |  |          |  |
| DEL DATE    |  | PROD. DATE |  | WARR EXP.                                  |  | PROMISED          |  | PO NO.  |  | RATE           |  | PAYMENT |  | INV DATE |  |
| 14DEC09     |  | 01NOV09    |  |                                            |  | 17:00 28JUL21     |  |         |  | 121.00         |  | CASH    |  | 29JUL21  |  |
| R.O. OPENED |  | READY      |  | OPTIONS: SOLD-STK: T10377010 DLR: AK-SALES |  |                   |  |         |  |                |  |         |  |          |  |
|             |  |            |  | ENG: 1GRA019833 TRN: A AXL: 273786173      |  |                   |  |         |  |                |  |         |  |          |  |

09:30 28JUL21 17:08 29JUL21

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A "FREE" VISUAL HEALTH CHECK  
 VHC "FREE" VISUAL HEALTH CHECK  
 206 IT 0.20  
 99261 PERFORM VHC  
 \*\*\*\*\*

B CUT AND REPROGRAM KEY  
 314T STARTING SYSTEM DIAGNOSIS  
 206 CT 1.00  
 1 89070-35170 TRANSMITTER ASSY, DO  
 1 BARNES KEY CUT  
 99261 CUT KEY & PROGRAM  
 \*\*\*\*\*

C ISD

NOTE :  
 206 CT 0.00  
 1 69211-60090-B0 HANDLE, DOOR, OUTSID  
 (PREPAID SPECIAL ORDER PART)  
 1 FRIM FREIGHT CHARGE  
 99261 SPECIAL ORDER  
 \*\*\*\*\*

EST: 121.00

28JUL21 09:30 SA: 117

CONTACT:

\*\*\*\*\*



TOYOTA



LEXUS

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Customer Name (PRINT)

DATE

CUSTOMER SIGNATURE

| DESCRIPTION            | TOTALS |
|------------------------|--------|
| LABOR AMOUNT           | 121.00 |
| PARTS AMOUNT           | 404.17 |
| GAS, OIL, LUBE         | 0.00   |
| SUBLET AMOUNT          | 0.00   |
| MISC. CHARGES          | 0.00   |
| TOTAL CHARGES          | 525.17 |
| LESS INSURANCE         | 0.00   |
| G.S.T.                 | 0.00   |
| PLEASE PAY THIS AMOUNT | 525.17 |

SHOWED DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER COPY












# PO ADJ\_ PR210637

Final Audit Report

2021-07-30

|                 |                                              |
|-----------------|----------------------------------------------|
| Created:        | 2021-07-30                                   |
| By:             | Danica Batac (batacd8156@triton.uog.edu)     |
| Status:         | Signed                                       |
| Transaction ID: | CBJCHBCAABAAYaz9umCO4JVP6GfCJ0khaxDBe80s3EBp |

## "PO ADJ\_ PR210637" History

-  Document created by Danica Batac (batacd8156@triton.uog.edu)  
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Signature Date: 2021-07-30 - 12:02:52 PM GMT - Time Source: server- IP address: 117.20.120.26
-  Agreement completed.  
2021-07-30 - 12:02:52 PM GMT



# PURCHASE ORDER

PO DATE: 07/22/21  
VENDOR NO.: 0021553



P.O. NUMBER: PR210637  
GL ACCT NOS: 30\_2F\_311117\_R\_5201050

VENDOR:  
  
ATKINS KROLL MOTORS DIVISI  
443 SOUTH MARINE DRIVE  
TAMUNING GU 96911

## RESEARCH CORPORATION OF THE UNIVERSITY OF GUAM

UOG Station, Mangilao, Guam 96923  
Telephone: (671) 735-0249 Fax: (671) 735-0252

SHIP TO:  
  
University of Guam  
Cnas - A. Moore  
303 University Dr, UOG Station  
Mangilao GU 96923

AUTHORITY: PO Expiration Date:

| ARTICLES OR SERVICES                                                                                                                  | QTY | UNIT | UNIT PRICE | AMOUNT   |
|---------------------------------------------------------------------------------------------------------------------------------------|-----|------|------------|----------|
| License Plate No. 5605<br>Recommnd Cut & Programmed<br>Key                                                                            | 1   | HR   | 1,264.83   | 1,264.83 |
| License Plate No. 5459<br>Recommnd Cut & Programmed<br>Key                                                                            | 1   |      | 636.21     | 636.21   |
| License Plate No. 5603<br>Recommnd Cut & Programmed<br>Key                                                                            | 1   |      | 1,264.83   | 1,264.83 |
| Justification:<br>Spare keys for project<br>vehicles to avoid loss of<br>use of the vehicles in<br>case the primary keys are<br>lost. |     |      |            |          |

|                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                           |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>SPECIAL INSTRUCTIONS TO VENDORS:</b><br>A. SEND CERTIFIED ORIGINAL AND TWO (2) COPIES OF INVOICE TO:<br><br>RCUOG, 303 UNIVERSITY DRIVE, UOG STATION, MANGILAO, GUAM 96923<br><br>THE P.O. NUMBER MUST APPEAR ON ALL INVOICES, PACKING SLIPS, B/L, ETC.<br>B. PAYMENT UPON RECEIPT OF MERCHANDISE IN GOOD CONDITION.<br>C. THIS ORDER IS SUBJECT TO TERMS AND CONDITIONS ON REVERSE SIDE. | DO NOT FILL THIS ORDER IF<br>YOUR COST EXCEEDS 10%<br>OF PO TOTAL                                                         | TOTAL: 3,165.87 |
|                                                                                                                                                                                                                                                                                                                                                                                              | APPROVING AUTHORITY<br><div style="text-align: center;"> <br/>                         7/22/21                     </div> |                 |

