



## University Procurement Services

Rutgers, The State University of New Jersey  
33 Knightsbridge Road, 1st Floor, East Wing  
Piscataway, NJ 08854  
[www.procurementservices.rutgers.edu](http://www.procurementservices.rutgers.edu)

| Purchase Order             |                             |              |
|----------------------------|-----------------------------|--------------|
| Purchase Order Date        | Purchase Order Number       | Revision No. |
| <b>Jan 22, 2018</b>        | <b>725211</b>               | <b>0</b>     |
| <b>Contact Information</b> |                             |              |
| Requestor Name             | Michelle Stuart             |              |
| Requestor Phone            | 8489325515                  |              |
| Requestor e-mail           | michelle.stuart@rutgers.edu |              |

| Supplier Information   | Delivery Information   | Billing Information  |
|--|--|--|
| Lacawac Sanctuary Foundation<br>94 Sanctuary Road<br>Lake Ariel, PA 18436 US<br>Phone +1 570-689-9494<br>Net Terms 0, Net 45<br>Quote number<br>Contract <i>no value</i><br>Attachments for supplier<br><br>Inv. #1056.pdf | <b>Delivery Address</b><br>Rutgers University<br>Attn: Michelle Stuart<br>Bldg/Room: Room 136<br>Env & Natural Res Sci<br>14 COLLEGE FARM RD<br>New Brunswick, NJ 08901-8551<br>F.O.B. Destination | <b>Email invoices to:</b><br>accountspayable@finance.rutgers.edu<br>INVOICES SUBMITTED WITHOUT A P.O. NUMBER WILL NOT BE PROCESSED.<br>THIS P.O. # MUST APPEAR ON INVOICES, PACKING SLIPS AND ANY CORRESPONDENCE RELATED TO THIS PURCHASE. |

| Line No. | Product Description                      | Catalog No. | Unit Price    | Quantity          | Ext. Price    |
|----------|--|-------------|---------------|-------------------|---------------|
| 1 of 1   | Research Lodging                         | NA          | 800.00<br>USD | 1 EA              | 800.00<br>USD |
|          | <u>ADDITIONAL INFO</u><br>Catalog No. NA |             |               |                   |               |
|          |  |             | Subtotal      | <b>800.00</b>     |               |
|          |  |             | Shipping      | 0.00              |               |
|          |  |             | Handling      | 0.00              |               |
|          |  |             | Total         | <b>800.00 USD</b> |               |

### Supplier Terms and Conditions

By accepting this Purchase Order, the supplier agrees to Rutgers' Terms and Conditions of the procurement of goods and services, available at <http://procurementservices.rutgers.edu>. The Rutgers' Terms and Conditions are hereby incorporated by reference, and shall not be modified without the express written consent of Rutgers, The State University of New Jersey.


### Approval Signature

J. Michael Gower  
Executive Vice President for Finance and Administration,  
University Treasurer

# Summary - PO 725211

Purchase Order  
Number 725211

Supplier Lacawac Sanctuary Foundation

| General Information                    |  | Shipping Information   | Billing/Payment                          |
|--|--|--|--|
| Purchase Order Number                  | <b>725211</b>  | <b>Ship To</b>   | <b>Bill To</b>                           |
| Revision No.                           | 0  Contains edits since last revision | Contact Name Michelle Stuart   | Accounts Payable                         |
| Supplier Name                          | Lacawac Sanctuary Foundation   | Room Room 136  | PO Box 2686                              |
| Address                                | 94 Sanctuary Road<br>Lake Ariel, PA 18436<br>US  | Env & Natural Res Sci<br>14 COLLEGE FARM RD<br>New Brunswick, NJ 08901-8551<br>United States | New Brunswick, NJ 08903<br>United States |
| Phone                                  | +1 570-689-9494  | ShipTo Address Code  | 5158                                     |
| Purchase Order Date                    | 1/22/2018  | <b>Delivery Options</b>  | <b>Billing Options</b>                   |
| Total                                  | 800.00 USD   | Requested  | Payment 0, Net 45                        |
| Requisition Number                     | 98235283   | Delivery Date  | Terms                                    |
| Business Unit                          | Rutgers BU<br>Rutgers University   | <b>Requestor Information</b>   | F.O.B. Destination                       |
| Business Associate Agreement Required? | No   | Requestor Michelle Stuart<br>Name  |  |
| Internal Work Order Number             | <i>no value</i>  | Requestor 8489325515<br>Phone  |  |
| Internal Project Tracking Number       | <i>no value</i>  | Requestor michelle.stuart@rutgers.edu<br>e-mail  |  |
| Payment Method Override                | <i>no value</i>  |  |  |
| Invoice Payment Priority Override      | <i>no value</i>  |  |  |
| <b>Contact Information</b>             |  |  |  |
| Prepared Michelle Stuart               |  |  |  |

For User  
Prepared  
For User  
Phone  
Prepared michelle.stuart@rutgers.edu  
For User  
Email

**Distribution Information****Distribution Methods**

The system will distribute purchase orders using the method(s) indicated below:

Email (HTML Body) info@lacawac.org

**Distribution Options**

Order acceptance instructions no order acceptance instructions

**Supplier Information****Supplier Information**

Contract no value

Note to Supplier no note

Attachments for supplier


↓ Inv. #105...

**Accounting Codes****GL String**

| Unit     | Division | Organization | Location | Fund Type | Business Line | Account  | Activity | RU Initiative |
|----------|----------|--------------|----------|-----------|---------------|----------|----------|---------------|
| no value | no value | no value     | no value | no value  | no value      | no value | no value | no value      |

**Project String**

| Project ID             | Task                        | Expenditure Type                               | Expenditure Organization | Location                               | Business Line                               | Activity | RU Initiative |
|------------------------|-----------------------------|--|--------------------------|--|---|----------|---------------|
| 200540                 | 215:200540                  | 56080  | 33050203537              | 2105                                   | 3400  | 0000     | no value      |
| 280092-<br>DEENR - ICR | MALIN<br>PINSKY<br>START-UP | Travel Lodging &<br>Accommodations<br>Domestic | 33050203537              | New<br>Brunswick<br>Regional<br>Campus | Other<br>Separately<br>Budgeted<br>Research | None     |               |

 Project String values vary by line

**Line Item Details**

| Product Description | Catalog No | Size / Packaging | Unit Price | Quantity | Ext. Price |
|---------------------|------------|------------------|------------|----------|------------|
|---------------------|------------|------------------|------------|----------|------------|

1

 **Research Lodging** 


NA

1/EA

800.00 USD

1 EA

800.00 USD

 Project String values have been overridden for this line

|                          |   |                    |                |
|--------------------------|---|--------------------|----------------|
| Commodity Code           | Hospitality:<br>Banquet/Conference<br>Space | Requisition Number | 98235283       |
|                          |   | External Note      | <i>no note</i> |
| Attachments for supplier |   |                    |                |

Shipping, Handling, and Tax charges are calculated and charged by each supplier.  
The values shown here are for estimation purposes, budget checking, and workflow approvals.

|          |                   |
|----------|-------------------|
| Subtotal | <b>800.00</b>     |
| Shipping | 0.00              |
| Handling | 0.00              |
| Total    | <b>800.00 USD</b> |

## Summary - Requisition 98235283

| General  | Shipping   | Billing  |
|--|--|--|
| <p>Status  Completed<br/>(1/22/2018 11:04 AM)</p> <p>Description</p> <p>Submitted 1/19/2018 2:00 PM</p> <p>Cart Name DEENR Pinsky Lacawac MRS</p> <p>Prepared by Michelle Stuart</p> <p>Requestor Name Michelle Stuart</p> <p>Requestor Phone 8489325515</p> <p>Requestor e-mail michelle.stuart@rutgers.edu</p> <p>Purchase Order 725211</p> <p>PO Clauses<br/><i>no clause</i></p> <p>Business Associate Agreement Required? No</p> <p>Internal Work Order Number <i>no value</i></p> <p>Internal Project Tracking Number <i>no value</i></p> <p>Payment Method Override <i>no value</i></p> <p>Invoice Payment Priority Override <i>no value</i></p> | <p><b>Ship To</b></p> <p>Contact Name Michelle Stuart</p> <p>Room Room 136</p> <p>Env &amp; Natural Res Sci</p> <p>14 COLLEGE FARM RD</p> <p>New Brunswick, NJ 08901-8551</p> <p>United States</p> | <p><b>Bill To</b></p> <p>Accounts Payable</p> <p>PO Box 2686</p> <p>New Brunswick, NJ 08903</p> <p>United States</p> |

Accounting Codes

GL String

| Unit     | Division | Organization | Location | Fund Type | Business Line | Account  | Activity | RU Initiative |
|----------|----------|--------------|----------|-----------|---------------|----------|----------|---------------|
| no value | no value | no value     | no value | no value  | no value      | no value | no value | no value      |

Project String


| Project ID         | Task                  | Expenditure Type                         | Expenditure Organization | Location                      | Business Line                      | Activity | RU Initiative |
|--------------------|-----------------------|--|--------------------------|-------------------------------|------------------------------------|----------|---------------|
| 200540             | 215:200540            | 56080                                    | 33050203537              | 2105                          | 3400                               | 0000     | no value      |
| 280092-DEENR - ICR | MALIN PINSKY START-UP | Travel Lodging & Accommodations Domestic | 33050203537              | New Brunswick Regional Campus | Other Separately Budgeted Research | None     |               |

 Project String values vary by line

Internal Notes and Attachments

Internal Note Lodging/conference space for a writing retreat between the Pinsky and Jensen labs.


Internal Attachments

 Inv. #105...

External Notes and Attachments

Note to all Suppliers no note




Attachments for all suppliers

 Inv. #105...

Supplier / Line Item Details

Lacawac Sanctuary Foundation

|           |          |
|-----------|----------|
| Contract  | no value |
| PO Number | 725211   |

| Product Description   | Catalog No     | Size / Packaging                      | Unit Price                                    | Quantity    | Ext. Price |
|---|----------------|---------------------------------------|---|-------------|------------|
| 1  <b>Research Lodging</b>  | NA             | 1/EA - Each                           | 800.00 USD                                    | 1 EA - Each | 800.00 USD |
|  Project String values have been overridden for this line  |                |                                       |   |             |            |
|   | Commodity Code | Hospitality: Banquet/Conference Space | Internal Note no note<br>Internal Attachments |             |            |

Supplier subtotal 800.00

|   |  |                |                   |
|---|--|----------------|-------------------|
|   |  | Shipping       | 0.00              |
|   |  | Handling       | 0.00              |
|   |  | Supplier total | <b>800.00 USD</b> |
|   |  |                |                   |
| Shipping, Handling, and Tax charges are calculated and charged by each supplier.<br>The values shown here are for estimation purposes, budget checking, and workflow approvals. |  | Subtotal       | <b>800.00</b>     |
|   |  | Shipping       | 0.00              |
|   |  | Handling       | 0.00              |
|   |  | Total          | <b>800.00 USD</b> |



## Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

|   |  |  |
|---|--|--|
| Print or type<br>See Specific instructions on page 2. | <b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.<br><b>Lacawac Sanctuary Foundation Inc.</b>   |  |
|   | <b>2</b> Business name/disregarded entity name, if different from above  |  |
|   | <b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:<br><input type="checkbox"/> Individual/sole proprietor or single-member LLC<br><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶<br><b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.<br><input checked="" type="checkbox"/> Other (see instructions) ▶ <b>Non Profit 501c3</b> | <b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):<br>Exempt payee code (if any) _____<br>Exemption from FATCA reporting code (if any) _____<br><small>(Applies to accounts maintained outside the U.S.)</small> |
|   | <b>5</b> Address (number, street, and apt. or suite no.)<br><b>94 Sanctuary Road</b>   | Requester's name and address (optional)  |
|   | <b>6</b> City, state, and ZIP code<br><b>Lake Ariel PA 18436</b>   |  |
|   | <b>7</b> List account number(s) here (optional)  |  |

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

|                                       |   |  |   |   |   |   |   |   |   |
|---------------------------------------|---|--|---|---|---|---|---|---|---|
| <b>Social security number</b>         |   |  |   |   |   |   |   |   |   |
|                                       |   |  | - |   |   |   | - |   |   |
| <b>or</b>                             |   |  |   |   |   |   |   |   |   |
| <b>Employer identification number</b> |   |  |   |   |   |   |   |   |   |
| 2                                     | 3 |  | - | 6 | 4 | 1 | 9 | 9 | 5 |

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶ **10/30/2017**

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

|   |   |   |
|---|---|---|
| Print or type<br>See Specific Instructions on page 2. | 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.<br><b>Lacawac Sanctuary Foundation</b>  |   |
|   | 2 Business name/disregarded entity name, if different from above  |   |
|   | 3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:<br><input type="checkbox"/> Individual/sole proprietor or single-member LLC<br><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____<br><b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.<br><input checked="" type="checkbox"/> Other (see instructions) ▶ <b>501c3 Non Profit</b> |   |
|   | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):<br>Exempt payee code (if any) _____<br>Exemption from FATCA reporting code (if any) _____<br><small>(Applies to accounts maintained outside the U.S.)</small>   |   |
|   | 5 Address (number, street, and apt. or suite no.)<br><b>94 Sanctuary Road</b>   | Requester's name and address (optional) |
|   | 6 City, state, and ZIP code<br><b>Lake Ariel Pennsylvania 18436</b>   |   |
|   | 7 List account number(s) here (optional)  |   |

## Part I Taxpayer Identification Number (TIN)

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|                        |  |  |   |  |  |  |   |  |
|------------------------|--|--|---|--|--|--|---|--|
| Social security number |  |  |   |  |  |  |   |  |
|                        |  |  | - |  |  |  | - |  |

or

|                                |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|
| Employer identification number |   |   |   |   |   |   |   |   |
| 2                              | 3 | - | 6 | 4 | 9 | 9 | 1 | 5 |

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶ **10/23/17**

## General Instructions

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- Form 1099-DIV (dividends, including those from stocks or mutual funds)
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- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

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- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

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- Certify that you are not subject to backup withholding, or
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- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.