

FAIRFIELD TOWNSHIP
RESOLUTION NO. 19-34

RESOLUTION TO APPROVE THE 2019 ANNUAL INVOICE PAYMENT IN THE AMOUNT OF \$13,703.00 TO MIAMI VALLEY REGIONAL CRIME LABORATORY.

WHEREAS: This will be paid out of Fund No. 2081;

NOW, THEREFORE, BE IT RESOLVED, by the Board of Trustees of Fairfield Township, Butler County, Ohio, as follows;

SECTION 1: The Board hereby approves the 2019 annual invoice payment in the amount of \$13,703.00 to Miami Valley Regional Crime Laboratory, attached hereto as Exhibit "A".

SECTION 2: The Board hereby dispenses with the requirement that this resolution be read on two separate days, pursuant to RC 504.10, and authorizes the adoption of this resolution upon its first reading.

SECTION 3 This resolution is the subject of the general authority granted to the Board of Trustees through the Ohio Revised Code and not the specific authority granted to the Board of Trustees through the status as a Limited Home Rule Township.

SECTION 4: That it is hereby found and determined that all formal actions of this Board concerning and relating to the passage of this Resolution were taken in meetings open to the public, in compliance with all legal requirements including §121.22 of the Ohio Revised Code.

SECTION 5: This resolution shall take effect at the earliest period allowed by law.

Adopted: February 27, 2019

Board of Trustees

Vote of Trustees

Shannon Hartkemeyer:

Shannon Hartkemeyer

Yes

Joe McAbee:

Joe McAbee

Yes

Susan Berding:

Susan Berding

Yes

AUTHENTICATION

This is to certify that this is a resolution which was duly passed, and filed with the Fairfield Township Fiscal Officer this 27th day of February, 2019.

ATTEST:

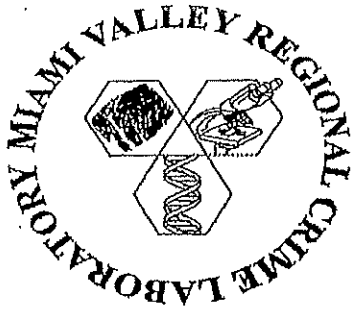
Shelly Schultz

Shelly Schultz, Fairfield Township Fiscal Officer

APPROVED AS TO FORM:

L. E. Barbieri

Lawrence E. Barbieri, Township Law Director



INVOICE #: AC900588

Miami Valley Regional Crime Laboratory

Attn: Accounting/Finance Department
 361 W. Third St.
 Dayton, OH 45402
 (937) 225-4990

BILL TO: FAIRFIELD TOWNSHIP POLICE DEPT
 ATTN: ACCOUNTS PAYABLE
 6485 VONNIE VALE CT
 HAMILTON, OH 45011

Customer Number: C-FAIRFDPOL / 001
Invoice Date: 2/7/2019

Terms: Due on Receipt

INVOICE					INVOICE
LINE #	INVOICE DESCRIPTION	SERVICE PERIOD	OCA	OBJ	AMOUNT
1	Laboratory Assessment	Jan 1-Dec 31, 2019	258001	2420	\$ 13,703.00

Total Invoice Amount \$ 13,703.00

Please send remittance to department and address at the very top of this invoice unless indicated otherwise and include our Invoice No. on remittance advice. If the "Bill To" is a Montgomery County Department or Agency, please complete next available blank line on the Interfund Transfer (IT) document attached to this invoice with the budgetary codes you want this charge to be applied to and return to the address indicated on this invoice.