



**CITY OF LAS VEGAS**  
1700 North Grand Avenue  
Las Vegas, New Mexico 87701  
Phone: (505) 454-1401 Fax: (505) 454-8027

# PURCHASE ORDER

**PO Number:** 240211

**Date:** 07/13/2023

**Request #:** 400241

**Vendor #:** 00053

**ISSUED TO:** ANIMAL CARE CLINIC  
100 MILLS AVE.  
LAS VEGAS, NM 87701

**SHIP TO:** CITY OF LAS VEGAS  
Attn:ANIMAL CARE CENTER  
1700 N GRAND AVE.  
LAS VEGAS, NM 87701

**Vendor Fax #:** (505) 454-9656

ITEM	UNITS	DESCRIPTION	PRICE	PROJ	GL ACCOUNT NUMBER	AMOUNT
1	1	RABIES VACCINES INVOICE 337125 EMERGENCY 13-1-127	64.80		101-4900-710-7305	64.80

DEPARTMENT ORDER

**Approved By:**

**Date:**

7/14/2023

<b>SUBTOTAL:</b>	64.80
<b>TAX:</b>	0.00
<b>SHIPPING:</b>	0.00
<b>TOTAL</b>	64.80

1. Original invoice plus one copy must be sent to: City of Las Vegas, 1700 North Grand Avenue, Las Vegas, NM 87701.
2. Payment may be expected within 30 days of receipt of goods, unless otherwise stated.
3. C.O.D. shipment will not be accepted.
4. Purchase Order numbers must appear on all shipping containers, packing slips and invoices. Failure to comply with the above request may delay payment.
5. All goods are to be shipped F.O.B. Destination unless otherwise stated.
6. All materials and services are subject to approval based on the description on the face of the purchase order or appendages thereof. Substitutions are not permitted without approval of the Requesting Department. Material not approved will be returned at no cost to the City.
7. All goods and equipment must meet or exceed all necessary city, state and federal standards and regulations.
8. Vendor or manufacturer bears risk of loss or damage until property received and/or installed.
9. Seller acknowledges that the buyer is an equal opportunity employer. Seller will comply with all equal opportunity laws and regulations that are applicable to it as a supplier of the buyer.
10. The City is exempt from all federal excise and state tax - ID# 85-6000149

**Finance Dept. (505) 454-1401 FAX (505) 454-8027**

## CITY OF LAS VEGAS REQUISITION FOR PURCHASE



Open PO

400241

PURCHASE ORDER NO.:

REQUIREMENTS

CHECK APPROPRIATE BOX

DATE:

7/13/2023

## PURCHASES INDER RESOLUTION #14-18 STATE PROCUREMENT CODE:

- ☐ \$0 TO \$19,999.99 Best Obtainable Price; Requires 3 telephoned, written, faxed or e-mailed quotes;
- ☐ \$20,000.00 TO \$59,999.99 Requires 3 written and signed quotes; (Goods or services)
- ☐ \$60,000.00 AND OVER Formal Process (Requires RFQ, RFP, RFB, etc.)

☐ BID NO.: \_\_\_\_\_ - \_\_\_\_\_ AWARDED: \_\_\_\_/\_\_\_\_/\_\_\_\_; CONTRACT NO.: \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(RECORD BID NUMBER, AWARDED DATE, AND CONTRACT NUMBER ABOVE)

☐ SPD CONTRACT; SPD NO.: \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ EXEMPT PURCHASE; Provide Section No.: \_\_\_\_\_

☐ GSA CONTRACT; GSA NO.: \_\_\_\_\_ - \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ PROFESSIONAL SERVICES; \_\_\_\_\_

☐ SOLE SOURCE: REQUIRES DETERMINATION AND MUST BE POSTED ON CLV WEBSITE FOR 30 DAYS  
PRIOR TO PROCURING GOODS AND/OR SERVICES.

☐ OTHER CITY CONTRACT: NO: \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ EMERGENCY; \_\_\_\_\_ SECTIONS 13-1-127 STATE PRODUREMENT CODE

## STATEMENT OF NEED: (Must Complete)

1 EMERGENCY DETERMINATIONS FOR ACC FY24

\* IN COMPLIANCE WITH THE PROCUREMENT CODE # 14-18 THE FOLLOWING QUOTES WERE OBTAINED\*

DATE	NAME OF VENDOR	PHONE NUMBER	PERSON CONTACTED	PRICE QUOTED

(If needed, attach additional quote documentation to this requisition)

LINE	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	SUB TOTAL
1	1	EACH	EMERGENCY ACC INVOICE 337126	64.8000	64.80
2				70.16	70.16
3					
4					-
5					-
6					-
7					-
8					-
					-
					-
					-
					-

VENDOR: ANIMAL CARE CLINIC

TOTAL: \$

64.80

ADDRESS:

NM CRS NO.:

FEDERAL TAX NO.:

I CERTIFY THAT THIS PURCHASE IS NECESSARY AND THAT THE REQUESTED ITEMS WILL BE PURCHASED AT THE  
LOWEST BID OR BEST OBTAINABLE PRICE.

BUDGET \$ 60,000.00

EXPENDED TO DATE \$ -

CURRENT EXPENSE \$ 64.80

BALANCE \$ 59,935.20

SIGNATURE OF PERSON REQUESTING  
101.4900.710.7305

APPROVED BY: D. Chery 7/14/23 FUND DEPARTMENT ACTIVITY  
BUDGET AVAILABLE YES: \_\_\_\_\_ NO: \_\_\_\_\_

WHITE COPY: ACCOUNTS PAYABLE

YELLOW COPY: PURCHASING

PINK COPY: DEPARTMENT

STATE OF NEW MEXICO  
EMERGENCY DETERMINATION FORM

The emergency procurement method (NMSA 1978, Section 13-1-127) may only be used when there exists a threat to public health, welfare, safety or property requiring procurement under emergency conditions. The existence of the emergency conditions creates an immediate and serious need for services, construction or items of tangible personal property that cannot be met through normal procurement methods and the lack of which would seriously threaten:

1. The functioning of government;
2. The preservation or protection of property; or
3. The health or safety of any person

I. Name of Agency: City of Las Vegas  
Agency Chief Procurement Officer: Helen Vigil  
Telephone Number: (505)454-1401

II. Name of Contractor: Animal Care Clinic  
Address of Contractor: 100 Mills Avenue Las Vegas, NM 87701  
Amount of prospective contract: \$64.80  
Term of prospective contract: Payment of invoice


III. Please thoroughly list the services (scope of work), construction or items of tangible personal property of the contract: Three dogs needed to receive rabies vaccinations prior to leaving the animal shelter through foster-to-adopt program

IV. Provide an explanation for the justification of the procurement including a description of the emergency condition(s) requiring use of emergency procurement and the practicable completion utilized in compliance with NMSA 1978, Section 13-1-127. The veterinarian administered rabies vaccines and rabies certificates for the three dogs.


V. Please describe what measures are being taken to minimize the duration and effect of this particular emergency procurement (for example: is the emergency only in place until a competitive process can be completed, etc.). We will only utilize this form of procurement when the situation deems it to be urgent. The ACC Manager deemed this situation urgent because we have not yet obtained quotes from all veterinary clinics in order to get a PO.

VI. Describe what measures the Agency will take in the future to prevent/mitigate use of an emergency procurement under similar circumstances. The ACC is working on obtaining new POs for numerous veterinary clinics for the new fiscal

year for and will primarily utilize those clinics, unless they are unable to accommodate these urgent/last minute situations.

  
 Director's Signature      Chief of Police      7-13-2023  
    Title      Date

Certified by:  
  
 Agency Chief Procurement Officer      7/14/2023  
    Date

Agency Approval by:  
  
 Governmental Entity Head or Designee      Deputy Finance Director      7/14/23  
    Title      Date

# INVOICE

## Animal Care Clinic

100 Mills Ave.  
Las Vegas, NM 87701  
505-454-0117

"YOU CAN COUNT ON US TO CARE"

**FOR:** Las Vegas Animal Center  
1680 North Grand  
Las Vegas, NM 87701

**Printed:** 07-07-23 at 1:31p

**Date:** 07-07-23

**Folder:** 21763

**Invoice:** 337126

Date	For	Qty	Description	Net Price
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Services by Dr Terry Jantzen

07-07-23	Dogs	1	Rabies Canine 1 Year* Rabies vaccine is given SQ in the right rear leg.	21.60
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<b>Old balance</b>	<b>Charges</b>	<b>Tax</b>	<b>Payments</b>	<b>New balance</b>
1332.14	64.80 +	*5.36	0.00	1402.30

= \$170.16

Reminders for: <b>Dogs</b> (Weight: 62.2 lbs -)		Last done
07/26	Rabies Canine 3 Years	07-07-23

Next appointment for <b>Dogs</b>		Qty
08-30-23	At: 9:00a	With: Terry Jantzen

Reduced cost vaccination clinic on Thursdays from 8:30 am to 1 pm. Vaccines given by a Veterinary Nurse. Call 505-454-0117 for an appointment.





June Tafoya <jcordova@lasvegasnm.gov>

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**Fwd: Scanned AWC - Las Vegas, NM**

1 message

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**Beatriz Gallegos** <bgallegos@lasvegasnm.gov>  
To: June Tafoya <jtafoya@lasvegasnm.gov>

Fri, Jul 7, 2023 at 2:11 PM

Hi June

Attached is the Emergency Purchase form for today's vet visit.

----- Forwarded message -----

From: <copier.clvnm@ci.las-vegas.nm.us>

Date: Fri, Jul 7, 2023 at 2:10 PM

Subject: Scanned AWC - Las Vegas, NM

To: <bgallegos@lasvegasnm.gov>

Please open the attached scan from AWC - Las Vegas, NM

Number of Images: 3

Attachment File Type: pdf, Multi-Page

Multifunction Printer Location:

Multifunction Printer Name: XRX9C934E996A0C

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\*The City of Las Vegas values responsiveness and commits to respond to all email and phone calls within 24 hours\*

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