

Qty Purchase Agreement QPA Number		Page
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Requisition Nbr.:	Fleet Fuel Card Program	
Effective Date:	10/01/2016	
Expiration Date:	12/31/2025	
Agency Number:		
Facility:	ASA-16-010	
Vendor ID:	0000119208	
Vendor Telephone Nbr:		
Name Of Contact Pers:		
Contact Email:		
FAX Number:		

Name and Address of Vendor: WEX BANK  
97 DARLING AVE  
SOUTH PORTLAND ME 04106

Line Number	Quantity	UNIT	Article and Description	Unit Price
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The following UN/CEFACT Unit of Measure Common Codes are used in this document:

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature	Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3150		