

Requisition

Supplier: HOPEWELL HEALTHCARE SERVICES LLC0000051374
 3637 MISSION AVE BLDG A STE 4
 CARMICHAEL CA 95608
 United States

Phone: (916) 246-8055
email: training@hopewellcpr.com

Ship To: RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630

Business Unit:		GENFD	OPEN
Req ID:	Date	Page	
0001049756	04/11/2024	1	
Requisition Name: 2024-HOPEWELL-EMT-CE			
Requester Colleen Mesa			
Requester Signature			
Buyer: Brenda Haney			
Approved:			
Entered By: MESAC 11-APR-2024			

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	E CARD-BLS PROVIDERS	120	EA	9.00	1,080.00	

1,080.00 Sub-total
83.70 Est. tax

Total Requisition Amount: 1,163.70

PLEASE PAY INVOICE # INV-001005 DTD 4/10/2024

<u>BU</u>	<u>Acct</u>	<u>Fd</u>	<u>Org</u>	<u>Prog</u>	<u>Sub</u>	<u>Proj</u>	<u>Amount</u>
GENFD	4300	12	FL.VI.VTEA	12500	00000	314A	1,080.00

Purchases Charged to Catagorical Programs, Grants or Special Project.

Program Name: PERKINS V
 Project Grant: 314A
 Program Director: CHRIS MORRIS
 Program Goal: STUDENT SUCCESS

Approval Signature	Approval Signature	Approval Signature
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INVOICE

Invoice# INV-001005

Hopewell Healthcare Services

3637 Mission Avenue
Suite 4
Carmichael California 95608
U.S.A

Balance Due
\$1,080.00

Bill To
Folsom Lake Community College
10 College Parkway
Folsom, CA 95630

Invoice Date : 04.10.2024

Terms : Due on Receipt

Due Date : 04.10.2024

Subject :
120 BLS Ecards

#	Item & Description	Qty	Rate	Amount
1	eCard-BLS Providers	120.00	9.00	1,080.00
			Sub Total	1,080.00
			Total	\$1,080.00
			Balance Due	\$1,080.00

Notes

Thank you for the payment. You just made our day.

Payment Options  