

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASING: (916) 568-3071 ACCOUNTING: (916) 568-3065

FAX: (916) 568-3145

PURCHASE ORDER NO 3014162A

PLEASE SEE REVERSE SIDE FOR SPECIAL INSTRUCTIONS, TERMS AND CONDITIONS.

Date	Revision	Page
06/19/2012		1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
765635-TEMPLETON POONV	04VAPA1150 VAPA	

F.I.C BUSINESS SET

2012 JUN 20 P

Johnson

Vendor: 0000032846
 ORR SAFETY CORPORATION
 11601 INTERCHANGE DR
 LOUISVILLE KY 40229

Ship To: FOLSOM LAKE COLLEGE
 RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630
 United States

Bill To: 1919 Spanos Court
 Sacramento CA 95825-3981
 United States

email:

Line-Sch	Item/Description	Quantity	UOM	PO Price	Extended Amt	Due Date
1- 1	AED PLUS PKG # 1, W/PADS BATT, PN 21400010101011010 #AOL214000101010	1.00	EA	1,423.00	1,423.00	06/19/2012
2- 1	CASE SOFT FOR AED ZOL0800080201	1.00	EA	119.00	119.00	06/19/2012

QUOTE # QS04190985 DATED 3/27/12

Revg:
 Deliver to *C. Johnson*
 for install into *VAPA RM: 1150*
Scene Shop

Sub Total Amount	1,542.00
Sales Tax Amount	119.50
Total PO Amount	1,661.50

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
COPFD	6490	41	FL.VA.VAPA	71000	83647	053C	1,661.50	2012

Verification of this purchase order can be made using the Los Rios Community College District web site listed below. If you have any questions, please contact the Purchasing Office at (916)568-3071.

<http://www.losrios.edu/purchasing/povalidation>

All shipments, invoices, and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to shipment.

Authorized Signature

Johnson 6/19/12

Notice to vendor: You are responsible for delivering goods and delivery documents to the Receiving Department at the site. Failure to do so will delay payment processing. Vendor is responsible for obtaining verification of delivery by authorized Receiving Room personnel. Receipt of goods by other parties and failure to obtain authorized signatures may also delay payment. NOTE: PAYMENT TERMS NET 30 MATERIAL SAFETY DATA SHEETS (MSDS) must be provided with the delivery of product as required by law.

PURCHASE ORDER TERMS AND CONDITIONS

1. **APPLICABLE LAW:** The contract resulting from this order shall be governed by the laws of the State of California
2. **COMPLETION OF ORDERS:** LRCCD reserves the right to withhold payment until order is completed.
3. **DISCOUNTS:** Please show cash payment discount offered on your invoice in connection with any discount offered, time will be computed from date of delivery of the supplies or equipment, or from date correct invoices are received in the office specified by LRCCD if the latter date is later than the date of delivery. Payment is deemed to be made for the purpose of earning discount, on the date payment is mailed or on behalf of LRCCD.
4. **INVOICES:** Invoices shall be prepared and submitted in duplicate unless otherwise specified. Invoices shall contain Purchase order number, date, description of items, sizes and quantities, unit prices, extended totals, place and date of delivery. Invoices or vouchers not on printed bill heads shall be signed by the CONTRACTOR or person furnishing the supplies or services. Every invoice shall be properly itemized. If LRCCD has not received billing for product or services within a one year period LRCCD will not be held responsible for satisfying the debt.
5. **CHANGES:** No change or modification in terms, quantities, or specifications may be made without express authorization in writing from the LRCCD Purchasing Office and signed by the parties hereto, and no oral understanding or agreement not incorporated herein shall be binding on any of the parties hereto. If unit cost of any item exceeds the amount shown by 10% or \$250.00 whichever is less do not ship. Contact LRCCD Purchasing at the phone number provided.
6. **BILL OF LADING:** If Bill of Lading is applicable to this order, send originals to "Ship to" address and duplicate Bill of Lading with invoices to "Bill to" address. All correspondence, invoices, bills of lading, shipping memos, packages, etc., must show purchase order number. If factory shipment, advise factory to comply.
7. **TRANSPORTATION CHARGES:** Invoices for prepaid transportation charges must be supported by original receipted expense bills.
8. **FOB POINT AND FREIGHT CHARGES:** Unless otherwise specified on this order, all items shall be delivered FOB Destination. No charge for delivery, drayage, express, parcel post, packing, cartage, insurance, license fees, permits, or for any other purpose will be paid by LRCCD unless expressly included and itemized in the order. Unless otherwise shown, on "FOB Shipping Point" transactions, CONTRACTOR shall arrange for lowest cost transportation, prepay and add freight to invoice and furnish supporting freight bills if the amount exceeds \$50.00. On "FOB Shipping Point" transactions, should any shipments under this purchase order be received by LRCCD in a damaged condition and any related freight loss and damage claims filed against the carrier or carriers be wholly or partially declined with the inference that damage was the result of the act of the shipper such as inadequate packaging or loading or some inherent defect in the equipment and/or material, CONTRACTOR on request of LRCCD shall at CONTRACTOR's own expense assist LRCCD in establishing carrier liability by supplying evidence that the equipment and/or materials was properly constructed, manufactured, packaged, and secured to withstand normal transportation conditions. Shipments that are California intrastate in nature and where freight is to be borne by LRCCD shall be tendered to carriers with written instructions that rate and charges may not exceed the lowest lawful rates on file with the California Public Utilities Commission.
9. **PATENT INDEMNITY:** The CONTRACTOR shall hold LRCCD, its officers, agents and employees harmless from alleged liability of any nature or kind, including costs and attorney fees and expenses, for infringement or use of any copyrighted or uncopyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.
10. **TAXES:** Certain articles sold to LRCCD are exempt from certain Federal excise taxes. LRCCD will reimburse the CONTRACTOR for, or pay directly, all California State and local sales and use taxes applicable to this purchase.
11. **EQUAL OPPORTUNITY EMPLOYER:** The acceptance of this purchase order by a supplier of goods and services is a certification that such supplier complies with all provisions of executive order 11246 and is an equal opportunity employer.
12. **GENERAL SAFETY ORDERS:** All materials, supplies and services sold to LRCCD shall conform to the general safety orders of the State of California. All materials, except as otherwise specified, must be new and of the best quality of their respective kinds.
13. **INDEMNIFICATION:** CONTRACTOR shall indemnify, defend and hold harmless LRCCD, its trustees, officers, agents, employees and volunteers, from any and all **claims**, demands, suits, causes of action, damages, penalties, breaches of this agreement, infringement of patent rights, costs, expenses, violations of employee occupational health and safety laws, attorney fees, losses or liability, property damage, personal injuries to or death of persons, arising out of, alleged to have arisen out of, or relating in any way to CONTRACTOR's work to be performed under this agreement, except if caused solely by the negligence of LRCCD.
14. **TERMINATION:** LRCCD may terminate this agreement and be relieved of the payment of any consideration to CONTRACTOR should CONTRACTOR fail to perform the covenants herein contained at the time and in the manner herein provided. In the event of such termination LRCCD may proceed with the work in any manner deemed proper by LRCCD. The cost to LRCCD shall be deducted from any sum due the CONTRACTOR under this agreement and the balance if any, shall be paid the CONTRACTOR upon demand.
15. **ASSIGNMENT:** Without the written consent of LRCCD, this agreement is not assignable by CONTRACTOR either in whole or in part.
16. **PUBLIC WORKS PROJECTS:** CONTRACTOR must comply with Public Contract Code.
17. **CA LABOR CODE:** Pursuant to Section 1700, and following, the CONTRACTOR shall pay not less than the prevailing rate of per diem wages as determined by the Director of the California Department of Industrial Relations. Copies of such prevailing rate of per diem wages are on file at the Business Office of the Los Rios Community College District, 1919 Spanos Court, Sacramento, CA 95825. Those copies shall be made available to any interested party upon request. The CONTRACTOR shall forfeit, as penalty to the LRCCD, Fifty Dollars (\$50.00) for each calendar day or portion thereof, for each workman paid less than the stipulated prevailing rates for any work done under the contract by him/her or by any subcontractor under him, in violation of the provisions of such Labor Code.
18. **NOTICE:** Your employees may be exposed to hazardous substances during the course of their work while on LRCCD property. For additional information on the hazardous substances that your employees may be exposed to contact the LRCCD General Services Department at (916) 568-3048.
19. **INSURANCE:** CONTRACTOR shall, at all times, maintain in full force and effect the following insurance: Workers' Compensation, Commercial General Liability, Auto Liability, and Professional Liability if licensed professional. Policy limits for each shall be at least \$1,000,000 AND \$3,000,000 AGGREGATE for bodily injury, personal injury and property damage. Any combination of General Liability and Excess Coverage can be combined to meet the Aggregate. LRCCD shall be named as an additional insured on CONTRACTOR's policies. The CONTRACTOR shall provide a certificate of insurance and required endorsements to comply with this section at least 15 days prior to commencement of work under this contract. The certificate shall state that LRCCD will be given 30 days notice of any material change or cancellation in coverage.
20. **DISQUALIFIED EMPLOYEES:** CONTRACTOR shall ensure that persons who perform services on LRCCD property have not been convicted of any felony, or any controlled substance offense or any sex offense as those terms are defined by Education Code section 87008-87010. If LRCCD determines that any person employed by CONTRACTOR to work on LRCCD property is incompetent, unfaithful, intemperate, disorderly, abusive or is otherwise unsatisfactory, CONTRACTOR shall cause that employee to be removed from working on LRCCD property immediately, and that person shall not be employed again on LRCCD property.
21. **WORK AUTHORIZATION:** Prior to LRCCD's acceptance of this Agreement, CONTRACTORS who are not U.S. citizens must provide verification of (a) work authorization status from the appropriate U.S. Department of State; (b) a copy of their U.S. visa; (c) the number of days present in the U.S.; and (d) tax treaty status. LRCCD shall not make any payments to CONTRACTOR unless CONTRACTOR holds the appropriate U.S. visa. CONTRACTOR is responsible for ensuring they are in possession of the appropriate visa.
22. **WARRANTY:** CONTRACTOR expressly warrants that all materials, goods, equipment, services, and/or labor shall conform to the requirements set forth or incorporated into this order and any applicable industry standards or requirements, shall be merchantable and free from defects in workmanship, materials and/or design (including latent defects), and shall perform as specified. CONTRACTOR further warrants that all materials, goods, equipment, services, and/or labor will be fit and sufficient for the particular purposes intended by LRCCD. Unless agreed upon otherwise between LRCCD and CONTRACTOR, the warranty period shall be the longer of: (a) any express warranty included in this service agreement; (b) one year after the materials, goods, equipment, services, and/or labor are accepted by LRCCD; or (c) any warranty period provided under any applicable California law.

Los Rios Community College District Requisition

Page 1 of 1

Req. No. 765635
P.O. NO. 3044162A

Vendor Code	DATE <u>4/23/12</u>
Approved	VENDOR <u>Orr Safety Corporation</u>
Terms	ADDRESS <u>11601 Intrchange Dr</u>
F.O.B.	CITY <u>Louisville</u> STATE <u>KY</u> ZIP <u>40229</u>
	PHONE <u>800-669-1677</u> FAX <u>502-515-8020</u>

DELIVERY INSTRUCTIONS	
Location Code	
College/District Location	Department
Division	Date Required

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED		AMOUNT	
		QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
*Use additional paper if necessary and please reference requisition number. DO NOT USE A SECOND REQUISITION.					
1	AED, Plus Pkg #1 w/pads, batt. Pn 21400010101011010	1	1		1423.00
2	Soft case for AED, ZOL8080080201	1	1		119.00
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

Purchases Charged to Categorical Programs, Grants or Special Projects				SalesTax	119.52
This purchase is in compliance with the requirements of _____					
Program Director/Coordinator Signature		Program Name	Project/Grant Number	Total	1661.52
		For grants/special projects			
Program Goal/Objective Number/Explanation					

I hereby certify the items/services listed above are to be obtained in accordance with District Regulation 8323, Section 4, Conflict of Interest, and all other applicable district, state, and federal policies, rules, regulations and laws.

REQUESTED BY: Sarah Templeton TYPED/PRINT DATE 4/23/12

REQUESTED BY: Sarah Templeton SIGNATURE DATE 4/23/12

AUTHORIZED: [Signature] DEAN OR AUTHORIZED SIGNATURE DATE 4/23/12

APPROVED: [Signature] VICEPRESIDENT, ADMINISTRATION DATE 4/23/12

COPPD/6490/41/FL.VA.VAPA
Bus. Unit Account* Fund Org

71000/83647 2012 0530 \$ 1661.52
Program Sub-Class BY Proj/Gmt Amount

Bus. Unit Account* Fund Org

Program Sub-Class BY Proj/Gmt Amount

* Asset Location - For equipment purchases over \$200 (Accounts 6490, 6495 and computers) complete the area below indicating the final location where equipment will be housed.

Location Code 04VAPA1150 Dept. Scene Shop

Building VAPA Room No. 1150

Instructions on Reverse



Orr Safety Corporation
 11601 Interchange Dr
 Louisville KY 40229

Quote	QS04190985
Date	3/27/2012
Page	1

QUOTE

Bill To:

CC TERRITORY 4501
 MUST SPECIFY ADDRESS
 FRESNO CA

Ship To:

Los Rios Community College Dist.
 1919 Spanos Court
 SACRAMENTO CA 95825

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Freight Term	Payment Terms	Req Ship Date	Master No.
ALICIA	CC4501	4501	UPS GROUND	PPA	CREDIT CARD PURC	0/0/0000	2,942,952
Quantity	Item Number	Description	UOM	Unit Price	Ext. Price		
1	ZOL214000101010	Aed, Plus Pkg #1,w/pads Batt, Pn 2140001010101010	EA	\$1,423.0000	\$1,423.00		
1	ZOL0800080201	Case Soft For Aed	EA	\$119.0000	\$119.00		

Subtotal	\$1,542.00
Misc	\$0.00
Tax	\$119.52
Shipping	\$0.00
Total	\$1,661.52

**This proposal is valid until 7/18/2012 unless otherwise stated.
 For Inquiries call Orr Safety Customer Service 1-800-669-1677**



CREDIT ACCOUNT APPLICATION

ORR SAFETY CORPORATION
 11601 INTERCHANGE DR
 LOUISVILLE, KY 40229
 TEL: 502-774-6557
 FAX: 502-515-8020

Name Of Business:			Shipping Address		
Billing Address _____					
City	State	Zip	City	State	Zip
County			Tel No. Fax No.		
Tel No.		Fax No.	Years Business		# Employees
Parent/Affiliate Company			Are you tax exempt for safety equipment? YES _____ NO _____ <i>[All accounts will be setup as taxable until a signed tax exemption certificate is provided]</i>		
Do you plan to resell our products? YES _____ NO _____					
Do you require Purchase Order? YES _____ NO _____					

Estimated Annual Purchases: \$	Credit Line Requested: \$

SUPPLIERS

Supplier Name	Supplier Name
Contact Person	Contact Person
Address	Address
City State Zip	City State Zip
Tel No. Fax No.	Tel No. Fax No.

CONTACTS AT YOUR COMPANY

Safety Purchasing Agent	Accounts Payables
Tel No. Ext.	Tel No. Ext.
Fax No.	Fax No.
e-mail:	e-mail:

The above information is for the purpose of obtaining credit and is warranted to be true. I hereby authorize Orr Safety Corporation to investigate the references listed pertaining to my/our credit and financial responsibility.

****Please Sign**** Applicant's signature attests acknowledgment of Orr Safety Credit Terms of Net 30 Days and that you have read and accept the Terms and Conditions of Orr Safety Corporation located at www.orrsecurity.com

FIRM NAME _____
 SIGNED BY _____ PRINT NAME & TITLE _____

FOR ORR SAFETY OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Terr 4501 Acct. Mgr Brendlen Credit Limit _____ Acct # _____

CREDIT APPROVAL BY: _____ DATE _____

LUS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASING: (916) 568-3071 ACCOUNTING: (916) 568-3065

FAX: (916) 568-3145

**PURCHASE ORDER NO
CANCELED PO**

0003014162

PLEASE SEE REVERSE SIDE FOR SPECIAL INSTRUCTIONS, TERMS
AND CONDITIONS.

Date 06/19/2012	Revision 1 - 06/19/2012	Page 1
Payment Terms NET 30	Freight Terms Shipping Point	Ship Via Best Metho
Reference: 0003003868 JOHNSON POONY VAPA		

PLC BUSINESS

2012 JUN 20 4:35

Vendor: 0000019662
DIPIETRO & ASSOCIATES INC
101 WEST MCKNIGHT WAY STE B255
GRASS VALLEY CA 95949

Phone: (530) 477-6818
Fax: (530) 477-6850

email: david@dipietroassociates.com

Ship To: FOLSOM LAKE COLLEGE
RECEIVING
10 COLLEGE PARKWAY
FOLSOM CA 95630
United States

Bill To: 1919 Spanos Court
Sacramento CA 95825-3981
United States

DO NOT SEND TO VENDOR

Tax Exempt? N	Line-Sch	Item/Description	Quantity	UOM	PO Price	Extended Amt	Due Date
	1- 1	AED PLUS - ZOLL INCLUDING ONE SET OF BATTERIES, ONE PAD, INTERNAL DATA STORAGE, AND PATIENT PREP KIT	1.00	EA	1,595.00	0.00	CANCEL
	2- 1	PADS, ACPR-D - ZOL, SUPPLIED WITH GLOVES, BARRIER MASK, SCISSORS AND WIPES, 5 YEAR SHELF LIFE	1.00	EA	120.69	0.00	CANCEL
	3- 1	KIT, PREP UPGRADE	1.00	EA	34.95	0.00	CANCEL
	4- 1	SIGN, V-SHAPED	1.00	EA	19.00	0.00	CANCEL
	5- 1	TEXTBOOKS, AED HEARTSAVER	1.00	EA	14.50	0.00	CANCEL
	6- 1	SHIPPING	1.00	EA	30.00	0.00	CANCEL

To Reference Only

SOW # 8167 DATED 3/12/12

6/19/12 - VP
CANCEL PO# 0003014162 AND REPLACE BY PO# 3014162A DUE TO THE CHANGE OF VENDOR
ORIGINAL ORDER HAS NOT BEEN DISPATCHED AND SENT

Sub Total Amount	0.00
Sales Tax Amount	0.00
Total PO Amount	0.00

DO NOT SEND TO VENDOR

BU Acct Fd Org Prog Sub Proj Amount BYear
0.00 2012

All shipments, invoices, and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to shipment.

Authorized Signature

No

Notice to vendor: You are responsible for delivering goods and delivery documents to the Receiving Department at the site. Failure to do so will delay payment processing. Vendor is responsible for obtaining verification of delivery by authorized Receiving Room personnel. Receipt of goods by other parties and failure to obtain authorized signatures may also delay payment. NOTE: PAYMENT TERMS NET 30 MATERIAL SAFETY DATA SHEETS (MSDS) must be provided with the delivery of product as required by law.

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASING: (916) 568-3071 ACCOUNTING: (916) 568-3065

FAX: (916) 568-3145

**PURCHASE ORDER NO
CANCELED PO**

0003014162

PLEASE SEE REVERSE SIDE FOR SPECIAL INSTRUCTIONS, TERMS
AND CONDITIONS.

Date 06/19/2012	Revision 1 - 06/19/2012	Page 2
Payment Terms NET 30	Freight Terms Shipping Point	Ship Via Best Metho
Reference: 0003003868 JOHNSON POONV		VAPA

Vendor: 0000019662
DIPIETRO & ASSOCIATES INC
101 WEST MCKNIGHT WAY STE B255
GRASS VALLEY CA 95949

Phone: (530) 477-6818
Fax: (530) 477-6850

email: david@dipietroassociates.com

Ship To: FOLSOM LAKE COLLEGE
RECEIVING
10 COLLEGE PARKWAY
FOLSOM CA 95630
United States

Bill To: 1919 Spanos Court
Sacramento CA 95825-3981
United States

Tax Exempt? N

Line-Sch	Item/Description	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	------------------	----------	-----	----------	--------------	----------

0003003868KIRKLINK21-MAR-2012

Verification of this purchase order can be made using the Los Rios Community College District web site listed below.
If you have any questions, please contact the Purchasing Office at (916) 568-3071.

<http://www.losrios.edu/purchasing/povalidation>

To Reference Only

All shipments, invoices, and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to shipment.

Authorized Signature

No

Notice to vendor: You are responsible for delivering goods and delivery documents to the Receiving Department at the site. Failure to do so will delay payment processing. Vendor is responsible for obtaining verification of delivery by authorized Receiving Room personnel. Receipt of goods by other parties and failure to obtain authorized signatures may also delay payment. NOTE: PAYMENT TERMS NET 30 MATERIAL SAFETY DATA SHEETS (MSDS) must be provided with the delivery of product as required by law.

PO# 0003014162

Requisition

Vendor: DIPIETRO & ASSOCIATES INC
 664 A FREEMAN LANE #311
 GRASS VALLEY CA 95949
 United States

Ship To: RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630

Business Unit: COPFD		OPEN
Req ID:	Date	Page
0003003868	03/15/2012	1
Requester		Bldg#
Colleen R Johnson		VAPA
Requester Signature		
Buyer: Vivian Poon		
Approved:		

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	AED PLUS - ZOLL	1.0000	EA	1,595.00	1,595.00	
2-1	ACPR-D PADS - ZOLL	1.0000	EA	120.69	120.69	
3-1	PREP KIT UPGRADE	1.0000	EA	34.95	34.95	
4-1	V-SHAPED SIGN	1.0000	EA	19.00	19.00	
5-1	AED TEXTBOOKS	1.0000	EA	14.50	14.50	
6-1	SHIPPING	1.0000	EA	30.00	30.00	

Total Requisition Amount: 1,814.14

PRODUCT TOTAL: \$1,784.14
 SHIPPING: \$30.00
 SALES TAX: \$138.26
 ORDER TOTAL: \$1,952.40

*Cancelled
 Request
 3/15/12*

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount
COPFD	6490	41	FL.VA.VAPA	71000	83647	053C	1,814.14

Purchases Charged to Catagorical Programs, Grants or Special Project.

This purchase is in compliance with the requirement of _____

For grants/special projects _____

 Name: _____

Approval Signature	Approval Signature	Approval Signature
--------------------	--------------------	--------------------