



LIMITED PURCHASE ORDER
(Not to Exceed \$200.00)

VENDOR NAME AND ADDRESS: <p style="font-size: 24pt; text-align: center;">ZACHARY DOWELL</p>	DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call
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ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	WELD-ON 3 Acrylic Solvent	1			7.95	7.95
2	GLUE APPLICATOR	1			3.25	3.25
3						
4						
5	Robotics Supply					
6						
7						
8						
9						
10						

Purchases Charged to Categorical Programs, Grants or Special Projects
This purchased is in compliance with the requirements of:

Program Name _____

For grants/special projects _____

Program Director/Coord. Signature _____ Project/Grant Number _____

Program Goal/Objective Number/Explanation _____

SUB-TOTAL	11.20
Sacramento City SALES TAX 8.5%	.95
8%	25.90
TOTAL (Not to Exceed \$200.00)	12.15
	72.15
	12.10

VENDOR: Reference P.O. number on all invoices and packing slips. Total invoice may not exceed \$200.00 including tax and shipping costs. Mail invoices in duplicate to: Los Rios Community College District, Accounting Department, 1919 Spanos Court, Sacramento, CA 95825.

Received by Zachary Dowell Date 5/1/13

I/WE 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: ZACHARY DOWELL DATE: 5/1/13

REQUESTED BY: Zachary Dowell DATE: 5/1/13

REQUESTED BY: [Signature] DATE: 5/1/13

GENFD / 4300 / 12 / FL-VI-INNO

Bus. Unit Account Fund Org

61900 / 00000 / 2013 / 6916 A

Program Sub-Class BY Proj/Grnt Amount

\$ 12.15

APPROVED: DEAN OR OTHER AUTHORIZED SIGNATURE DATE

[Signature] 5/8/13

APPROVED: VICE PRESIDENT, ADMINISTRATION DATE

Bus. Unit Account Fund Org

Program Sub-Class BY Proj/Grnt Amount

\$

Tap Plastics #27
4506 Florin Rd
Sacramento, CA 95823
916-429-9551

TERMINAL ID.: 70289703
MERCHANT #: 55580995900

DEBIT
*****9006 EXP:*/** SWIPED
DEBIT SALE
BATCH: 000115 INV: 000015
May 01: 13 14:05
RRN: 312105003947 AUTH: 016366
TRAN SEQ #: 003947

TRACE #: 003947
NETWORK ID: 38
SETTLE DATE: 05/02
TRANSACTION ID: 383121759185109
APPROVAL 016366

XXXXXXXXXXXXXXXXXXXX

*** NO REFUNDS ALLOWED

SIGNATURE NOT REQUIRED

THANK YOU!

CUSTOMER COPY

TAP PLASTICS
4506 FLORIN ROAD
SACRAMENTO, CA 95823
916-429-9551

REG 05-01-2013 02:04 PM
Dave MC#01 076096

1 MISC	T1	\$7.95
1 MISC	T1	\$3.25
TAX AMT		\$11.20
TAX		\$0.95
TOTAL		\$12.15
CREDIT CARD		\$12.15