

FOLSOM LAKE COLLEGE

100 SCHOLAR WAY • FOLSOM, CA 95630
TELEPHONE (916) 608-6549

CHECK NO. **FL-00831**

VENDOR NO. **0000003279**

DATE **September 4, 2013**

LOCATION **09**

*9/6/13 to AORS
PR. 94-684657
9/19/13*

TO **El Dorado Hills Chamber of Commerce
2085 Vine St. Ste 105
El Dorado Hills, CA 95762**

REQUISITIONED BY
Req# 758035 - E. Hart/K. Kirklin

| | | | | | | | | |
|----------|---------|------|------------------|---------|-------|------|---------------|----------|
| GENFD | 5300 | 11 | FL.VA.PISO | 67100 | 00000 | 2014 | 041A | \$250.00 |
| BUS UNIT | ACCOUNT | FUND | DEPARTMENT (ORG) | PROGRAM | CLASS | BY | PROJECT/GRANT | AMOUNT |

| | | | | | | | | |
|----------|---------|------|------------------|---------|-------|----|---------------|--------|
| | | | | | | | | |
| BUS UNIT | ACCOUNT | FUND | DEPARTMENT (ORG) | PROGRAM | CLASS | BY | PROJECT/GRANT | AMOUNT |

| QUANTITY | UNIT | DESCRIPTION | UNIT PRICE | EST. TOTAL AMOUNT |
|----------|------|--|------------|-------------------|
| 1 | ea | Membership - Business Connector Base Level for 10/1/13 to 9/30/14 | | \$250.00 |

RECEIVED BY: _____
DATE: _____

| | | |
|--|--|--|
| FOLSOM LAKE COLLEGE REVOLVING FUND ACCOUNT 100 Scholar Way • Folsom, CA 95630 | BANK OF AMERICA GOVERNMENT BANKING | CHECK No. FL-00831 DATE: <u>September 4, 2013</u> |
| Folsom Lake College will pay to the order of: | | \$ 250.00 (NOT TO EXCEED \$250.00) |
| *****El Dorado Hills Chamber of Commerce***** Two Hundred Fifty and no/100 | | DOLLARS * THIS CHECK VOID 60 DAYS FROM DATE DRAWN |
| COPY NOT NEGOTIABLE | | |



El Dorado Hills Chamber of Commerce
 2085 Vine St., Ste. 105
 El Dorado Hills, CA 95762
 (916) 933-1335

Invoice

Invoice No. 9133

Invoice Date: 08/20/2013

Scott Crow
 Folsom Lake College
 10 College Pkwy.
 Folsom, CA 95630

Member ID: 1273
Date Due: 10/01/2013

| Description | Qty | Rate | Amount |
|--|------|--------|---------------|
| Business Connector - Base Level Membership | 1.00 | 250.00 | 250.00 |
| 10/01/2013 to 09/30/2014 | | | |
| Donation to Chamber | 1.00 | 0.00 | |
| Total: | | | 250.00 |
| Amt Paid: | | | 0.00 |
| Balance Due: | | | 250.00 |

Membership dues are not deductible as charitable contributions for Income Tax purposes. Dues may be considered ordinary and necessary business deductions. Up to 1% of dues may be used for lobbying purposes and may not be used as a business deduction.

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Folsom Lake College
 10 College Pkwy.
 Folsom, CA 95630

Member ID: 1273
Invoice Number: 9133
Due Date: 10/01/2013
Total Due: 250.00

Payment Enclosed: \$ _____
Make checks payable to:
 El Dorado Hills Chamber of Commerce
 2085 Vine St., Ste. 105
 El Dorado Hills, CA 95762

Please verify address and provide corrections below:

Organization Name: _____
Primary Billing Person: Kristy Hart
Mailing Address: _____

City, State, Zipcode: _____

Convenient online payment option at:
<http://www.eldoradohillschamber.org>

Charge:
 VISA
 Mastercard

Card No. _____ Exp. Date _____
 Signature _____ Sec. Code _____

Los Rios Community College District

Requisition

Page 1 of 1

| | |
|----------|--------|
| Req. No. | 758035 |
| P.O. NO. | |

| | |
|-------------------------------------|--|
| Vendor Code | DATE <u>8/27/13</u> |
| Approved | VENDOR <u>El Dorado Hills Chamber of Commerce</u> |
| Terms | ADDRESS <u>2085 Vine St., Ste. 105</u> |
| F.O.B. | CITY <u>El Dorado Hills</u> STATE <u>CA</u> ZIP <u>95762</u> |
| PHONE <u>916-933-1335</u> FAX _____ | |

| | |
|---------------------------|--------------------------|
| DELIVERY INSTRUCTIONS | |
| <u>ON ADMIN</u> | |
| College/District Location | Location Code <u>FLC</u> |
| | Department <u>PLSO</u> |
| Division | Date Required |

| ITEM | DESCRIPTION | 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 | <u>Business Connector - Base Level</u> | | | | 250.00 |
| 2 | <u>Membership for 10/1/13 - 9/30/14</u> | | | | |
| 3 | <u>(see attached invoice #9133)</u> | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | <u>REVL A/C # FLOW 831</u> | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |

| | | | |
|---|--------------------|----------------------------|--------------|
| Purchases Charged to Categorical Programs, Grants or Special Projects | | | Sales Tax |
| This purchase is in compliance with the requirements of _____ | | | |
| Program Director/Coordinator Signature _____ | Program Name _____ | Project/Grant Number _____ | Total |
| For grants/special projects _____ | | | 250.00 |
| 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.

Kristin L. Hart 8/27/13
 REQUESTED BY: TYPED/PRINT DATE

Kristin L. Hart 8/27/13
 REQUESTED BY: SIGNATURE DATE

[Signature] 8/28/13
 AUTHORIZED: DEAN OR AUTHORIZED SIGNATURE DATE

[Signature] 8/28/13
 APPROVED: VICE PRESIDENT, ADMINISTRATION DATE

GENFD/ 5300 / 11 / FL VA PLSO

| | | | | | |
|--------------|-------------|-------------|-------------|--------|------------------|
| Bus. Unit | Account * | Fund | Org | | |
| <u>67100</u> | <u>0000</u> | <u>2014</u> | <u>041A</u> | | \$ <u>250.00</u> |
| Program | Sub-Class | BY | Proj/Grnt | Amount | |
| | | | | | |
| Bus. Unit | Account * | Fund | Org | | |
| | | | | | |
| Program | Sub-Class | BY | Proj/Grnt | 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 _____ Dept. _____

Building _____ Room No. _____

Instructions on Reverse