

FOLSOM LAKE COLLEGE

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

CHECK NO. **FL- 00839**

VENDOR NO. **0000003279**

DATE ~~XXXXXXXXXXXXXXXXXX~~
~~7/7/~~

LOCATION **09**

October 1, 2013

TO College Reading & Learning Assn.
7044 S. 13th Street
Oak Creek, WI 53154

REQUISITIONED BY
REQ# 768018 - M. Albert/M. Pactol

GENFD	5300	12	FL.VI.BSKL	04900	00000	2014	577I	\$60.00
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
		CRLA Annual Membership Renewal #3459 for Marcia Albert FLC Learning Skills Coordinator		\$60.00
		RECEIVED BY: _____		
		DATE: _____		

FOLSOM LAKE COLLEGE REVOLVING FUND ACCOUNT 100 Scholar Way • Folsom, CA 95630 Folsom Lake College will pay to the order of: *****CRLA***** -----Sixty and no/100----- DOLLARS	BANK OF AMERICA GOVERNMENT BANKING	CHECK No. FL- 00839 DATE: <u>October 1, 2013</u> \$ 60.00 (NOT TO EXCEED \$250.00) *THIS CHECK VOID 60 DAYS FROM DATE DRAWN
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Marcia Albert

⑈000839⑈ ⑆121000358⑆ 14993⑈ 11042⑈

Los Rios Community College District

Requisition

Page _____ of _____

Req. No. 768018
P.O. NO.

Vendor Code	DATE 9-23-13
Approved	VENDOR College Reading & Learning Assn.
Terms	ADDRESS 7044 S. 13th Street
F.O.B.	CITY Oak Creek STATE WI ZIP 53154
	PHONE _____ FAX _____

DELIVERY INSTRUCTIONS	
04D06H128	
Location Code	 tutoring
College/District Location	Department
FC	Instructional
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	Annual Membership Dues - Renewal				
2	notice No. 105572 dated 9/1/13				
3	expires 12/31/13				
4	Calendar Year 9/1/14 - 12/31/14				
5	REVL cel # FLOOR 838				
6					
7					
8					
9					
10					
11					
12					
13					

Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of Basic Skills	Sales Tax	
Program Name: 577I Project/Grant Number: _____	Total	\$60.00
Program Director/Coordinator Signature: _____ For grants/special projects: membership		
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: **maria albert** TYPED/PRINT DATE: **9/23/13**

REQUESTED BY: _____ SIGNATURE DATE: **9.23.13**

AUTHORIZED: _____ DEAN OR AUTHORIZED SIGNATURE DATE: **9/30/13**

APPROVED: _____ VICE PRESIDENT, ADMINISTRATION DATE: _____

Instructions on Reverse

GENFD / 5300 / 12 / F.V.I. BSKL	Bus. Unit	Account*	Fund	Org	
6490 / 100000 / 2014 / 577I					\$ 60.00
	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. _____



Membership Dues Notice

Remit Payment to:
College Reading & Learning Association
7044 S. 13th St.
Oak Creek, WI. 53154 USA
EIN: 95-3177158

Membership Information:

Marcia Albert
Folsom Lake College
10 College Parkway

Folsom CA 95630 USA

Work Phone: 916-608-6807 Work Fax:

E-mail Address: albertm@flc.losrios.edu

Invoice Information:

Invoice #: 105572
Invoice Date: 09/01/2013

Member Number: 3459
Expiration Date: 12/31/2013
User ID: albertm@flc.losrios.edu

<u>Invoice Description:</u>	<u>Amount Due:</u>
Annual Membership Dues - Renewal	\$60.00
Total:	\$60.00
Membership Category: MEMBERSHIP	

Please indicate which SIG's you would like to be involved in. SIG's are an additional \$5 per year per SIG.

- | | |
|---|---|
| <input type="checkbox"/> Brain Compatible Teaching/Learning | <input type="checkbox"/> Learning Communities |
| <input type="checkbox"/> College Reading | <input type="checkbox"/> Learning Disabilities |
| <input type="checkbox"/> College Writing | <input type="checkbox"/> Mathematics |
| <input type="checkbox"/> English Speakers of Other Languages (ESOL) | <input type="checkbox"/> Multicultural Issues |
| <input type="checkbox"/> Graduate & Professional Student Success | <input type="checkbox"/> Peer Assistance Programs |
| <input type="checkbox"/> Learning & Study Strategies | <input type="checkbox"/> Research and Evaluation |
| <input type="checkbox"/> Learning Assistance Center Management | <input type="checkbox"/> Technology & Distance Learning |

- CRLA communicates frequently by e-mail, please be sure the e-mail address above is where you want to receive CRLA e-mail.
- Please review the member information shown above and note any changes on this form.

Payment Information:

- Checks (drawn on U.S. Bank) should be made payable to CRLA.
- Payment may be made by credit card and faxed to 414-768-8001 by completing the information below.
- If paying by mail, please remit to the address listed above and include a copy of this invoice with your payment.

Method of Payment (Please circle one): Check Visa MasterCard American Express

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Billing Address on Credit Card: _____

Cardholder Name: _____

Card Holder Signature: _____