

FOLSOM LAKE COLLEGE

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

CHECK NO. **FL- 00881**

VENDOR NO. **0000003279**

DATE *July 18, 2014*

LOCATION **09**

TO *CPP Inc.
1055' Joaquin Rd. 2nd Floor
Mountain View CA 94043*

REQUISITIONED BY
LPO F 2504 / DIXON

<i>GENFD</i>	<i>5603</i>	<i>12</i>	<i>FL.VI. AR04</i>	<i>49301</i>	<i>00000</i>	<i>2015</i>	<i>700P</i>	<i>19500</i>
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
<i>1</i>	<i>EA</i>	<i>Skillsone Site License / Software Renewal 2014-2015</i>	<i>195</i>	<i>19500</i>
		<i>INV# RI 47505</i>		
		RECEIVED BY: _____		
		DATE: _____		

FOLSOM LAKE COLLEGE REVOLVING FUND ACCOUNT 100 Scholar Way • Folsom, CA 95630	BANK OF AMERICA GOVERNMENT BANKING	CHECK No. FL- 00881
Folsom Lake College will pay to the order of:	DATE: <i>July 18, 2014</i>	11-35 1210
<i>CPP, INC.</i>	\$ <i>19500</i>	(NOT TO EXCEED \$250.00)
<i>One Hundred Ninety-Five and 00/100</i>	DOLLARS	*THIS CHECK VOID 60 DAYS FROM DATE DRAWN
⑈00088⑈ ⑆121000358⑆ 14993⑈ 11042⑈		



LIMITED PURCHASE ORDER
(Not to Exceed \$200.00)

<p>VENDOR NAME AND ADDRESS: CPP, Inc 1055 Joaquin Rd. 2nd floor Mountainview, CA 94043</p>	<p>DELIVERY INSTRUCTIONS: <input checked="" type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call CPP, Inc. PO Box 49156 San Jose, CA 95161</p>
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ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	Skillsone site					195.00
2	renewal fee					
3	2014-2015	1	1	10212	195	
4	Software					
5						
6						
7						
8						
9						
10	INV# RI 47505	7/18/14		FL00881		

PAID
Pre-Paid

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

Program Name: **700P**
Project/Grant Number: **700P**

Program Goal/Objective Number/Explanation: **renewal for course usage**

SUB-TOTAL	
SALES TAX	
TOTAL (Not to Exceed \$200.00)	195.00

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.

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: **Kim Carrillo** DATE: **6/23/14**

REQUESTED BY: **[Signature]** DATE: **6/23/14**

APPROVED: **[Signature]** DATE: **6/24/14**

APPROVED: _____ DATE: _____

Received by	Date			
gentd5603	6/23/14			
Bus. Unit	Account	Fund	Org	
49301	0000	2015	700P	
Program	Sub-Class	BY	Proj/Grnt	Amount
				\$ 195.00
Bus. Unit	Account	Fund	Org	
Program	Sub-Class	BY	Proj/Grnt	Amount
				\$

INVOICE



CPP, Inc.
1055 Joaquin Road, 2nd Floor, Mountain View, CA 94043
800.624.1765 Fax: 650.969.8608 ar@cpp.com www.cpp.com
Federal ID. 94-1337736

Invoice No.: RI 47505
Invoice Date: 06/10/14
Due Date: 07/10/14
Total Amount Due: \$195.00

TERMS: Net 30 Days

CUSTOMER NO.: 278073

Kim Carillo
Folsom Lake Coll
10 College Pkwy
Administrative Assistan
Folsom CA 95630
United States of America

SHIP TO NO.:

FOLSOM LAKE COLLEGE
100 SCHOLAR WAY
FOLSOM CA 95630
United States of America

Camille Snow

ORDER NO.:
ORDER DATE: 06/10/14
CUSTOMER PO:
CARRIER:
SHIPPING METHOD:

CURRENCY: USD

LINE	ITEM/DESCRIPTION	QUANTITY	SELL UOM	UNIT PRICE	PRICE UOM	DISCOUNT	NET AMOUNT
1	10212 SKILLSONE SITE RENEWAL FEE	1	EACH	195.00	EACH		195.00
	Sales Tax						0.00

Detach portion below (from last page only) and send it with a payment. See back of this sheet to pay with a credit card.

IMPORTANT! To ensure your payment is applied correctly, please write Customer No. and Invoice No. on your check

REMIT TO:
CPP, INC.
PO BOX 49156
SAN JOSE CA 95161
USA

Customer No.: 278073	FREIGHT/HANDLING:	0.00
Invoice No.: RI 47505	SUBTOTAL:	195.00
	TOTAL TAX AMOUNT:	0.00
	PRE-PAYMENT:	0.00
	TOTAL AMOUNT DUE:	\$195.00

ORIGINAL