

14/15 COMPL

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001079578

PURCHASING: (916) 568-3071 • FAX: (916) 568-3145
ACCOUNTING OPS: (916) 568-3065 • FAX: (916) 286-3636

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Date	Revision	Page
01/09/2015		1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
808623 RUSSOP GALLARZC	04VAPA	

Vendor: 0000030068
TRI-CITY TECHNOLOGIES
2615 DEL MONTE STREET
WEST SACRAMENTO CA 95691

Phone: (916) 503.5300
Fax: (916) 503.5310

email:

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
1- 1	ITEM CODE: PRINT-TA FALCON'S EYE THEATRE MAILER QTY: 6,100	1.00 JOB	848.50	848.50	01/16/2015
2- 1	ITEM CODE: MAIL-ADD MAILING SERVICES	1.00 EA	426.75	426.75	01/16/2015
3- 1	ITEM CODE: PRINT-TA OVER'S ON MAILER	1.00 JOB	50.00	50.00	01/16/2015

PAY INVOICE #21410-1753 DATED 10/31/14.

Sub Total Amount	1,325.25
Sales Tax Amount	71.88
Total PO Amount	1,397.13

Paid
94-712519
2/19/15
\$1397.13

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	4300	12	FL.VI.AR07	10070	00000	700P	1,397.13	2015

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>

1/28/15 Verified inv vouchered to PS - Amt Schl'd
for 2/5/15 Vendor CK Run.

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
[Signature] 1/14/15

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

American River College • Cosumnes River College • Folsom Lake College • Sacramento City College

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.

From: [Haney, Brenda](#)
To: [Pactol, Monica](#)
Cc: [Anderson, Jae](#)
Subject: FW: 2nd Request_ FW: FOR YOUR ACTION _ TRI-CITY TECHNOLOGIES_ REQ#_808623
Date: Friday, December 19, 2014 9:06:20 AM
Attachments: [HOLD_REQ#_808623_TRI-CITY TECH_AREA DOCS & BUDGET REQUESTED.pdf](#)
[FOR YOUR ACTION TRI-CITY TECHNOLOGIES FW Change Order Request Tri-Cities.msg](#)

Monica –

Thank you your signature today for this REQ_808623 – I will submit to Purchasing and Accounting for vendor to be paid.

We are still awaiting both items 1 and 2 requested below from Area 7.

Thank you,

Brenda Haney

Business Services

Folsom Lake College | 10 College Parkway | Folsom, CA 95630

☎ 916.608.6635 | ✉ haneyb@flc.losrios.edu

From: Haney, Brenda
Sent: Wednesday, December 17, 2014 3:41 PM
To: Williams, David
Cc: Russo, Renee
Subject: 2nd Request_ FW: FOR YOUR ACTION _ TRI-CITY TECHNOLOGIES_ REQ#_808623

Hi David –

The following items are needed to finalize Tri-City Technology REQ_808623/PO:

- 1) *Letter of Explanation for Unauthorized Purchase* - for Tri-City Printing Services and Bulk Mail Permit use without LRCCD PO (1ST request attached).
- 2) 5810 budget string (funded) to cover Postage Chargeback for use of Bulk Mail Permit 41 for this purchase.
 - a. Total Postage used \$897.33 (receipt enclosed with attached PDF).
FLC BSO to process JE ChgBK for Postage.

ACCOUNT	DESCRIPTION
5810	Postage

Thank you,

Brenda Haney

Business Services

Folsom Lake College | 10 College Parkway | Folsom, CA 95630

Los Rios Community College District

Requisition

Page 1 of 1

Req. No. **808623**

Vendor Code _____ DATE 11/13/14 VENDOR Tri Cities Technology

P.O. NO. _____

Approved by / Date _____ ADDRESS 2615 Del Monte Street

Reviewed by / Date _____ CITY West Sacramento STATE CA ZIP 95691

Dispatched Method / Date _____ E-MAIL _____

PHONE 916-503-5300 FAX _____

DELIVERY INSTRUCTIONS	
<p style="font-size: 24pt; margin: 0;">04VAPA</p> <p style="font-size: 18pt; margin: 0;">FLC TA</p>	<p style="font-size: 12pt; margin: 0;">Department Building Location</p>
<p style="font-size: 18pt; margin: 0;">Instructional</p>	<p style="font-size: 12pt; margin: 0;">College/District Location Department</p>
<p style="font-size: 10pt; margin: 0;">Division</p>	<p style="font-size: 10pt; margin: 0;">Date Required</p>

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	Copy/Print Services	6100	ea		848.58
2	Print 4 color process 2/sides on #100 Gloss book				
3	Overs quantity 500				50.00
4					
5	Mail Services (not taxed)				426.75
6	Mail services supplied from List				
7	Delivered to Folsom Post Office				
All Product & Services Received.					
Order Placed & Processed w/o Authorized REQ/PO					
Request Sent to Area Deans for:					
Letter of Explanation for Unauthorized Purchase					
* Payment Due to Vendor Invoice # 21410-1753 attached -					
Please fwd to AOPS for payment in 1/8/2015 CK Pun					
13					

Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of <u>Lottery</u>	Sales Tax	\$71.88
Program Name <u>700P</u> For grants/special projects _____ Program Director/Coordinator Signature _____ Project/Grant Number _____	Total	\$1397.13
Program Goal/Objective Number/Explanation _____		

I hereby certify the items/services listed above shall be obtained in accordance with District Policy, Conflict of Interest Code, P-8611, and all other applicable district, state and federal policies, rules, regulations and laws.

REQUESTED BY: <u>P. Russo</u> TYPED/PRINT	DATE: <u>11/12/14</u>
REQUESTED BY: <u>[Signature]</u> SIGNATURE	DATE: <u>11/12/14</u>
AUTHORIZED: <u>[Signature]</u> DEAN OR AUTHORIZED SIGNATURE	DATE: <u>11-12-14</u>
APPROVED: <u>[Signature]</u> VICE PRESIDENT, ADMINISTRATION	DATE: <u>12.19.14</u>

GENED / 4300 / 12 / FL.VI. DR07

Bus. Unit	Account	* Fund	Org	
<u>10090</u>	<u>100000</u>	<u>12015</u>	<u>700P</u>	\$ <u>1397.13</u>
Program	Sub-Class	BY	Proj/Grnt	Amount
/	/	/	/	
Bus. Unit	Account	* Fund	Org	
/	/	/	/	\$
Program	Sub-Class	BY	Proj/Grnt	Amount
/	/	/	/	

* Asset Location - Equipment purchases over \$200 (Accts: 6480, 6490, 6491, 6493, 6495) complete the area below indicating the final assigned location of equipment.

Location Code _____ Dept. _____

Building _____ Room No. _____

ORIGINAL

Los Rios Community College District

Requisition

Page 1 of 1

Req. No. **808623**

Vendor Code _____ DATE 11/13/14 VENDOR Tri Cities Technology
 Approved by / Date _____ ADDRESS 2615 Del Monte Street
 Reviewed by / Date _____ CITY West Sacramento STATE CA ZIP 95691
 Dispatched Method / Date _____ E-MAIL _____
 PHONE 916-503-5300 FAX _____

P.O. NO. _____

DELIVERY INSTRUCTIONS

04VAPA

Department Building Location
FLC **TA**

College/District Location Department
Instructional

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	Copy/Print Services	6100	ea		848.58
2	Print 4 color process 2/sides on #100 Gloss book				
3	Overs quantity 500				50.00
4					
5	Mail Services (not taxed)				426.75
6	Mail services supplied from List				
7	Delivered to Folsom Post Office				
8	All Product & Services Received: Order placed & processed by Area without Authorized REQ/PO.				
9	Request Sent to Area Dean for: Letter of Explanation for Unauthorized Purchase.				
10	*Payment Due to Vendor - Invoice# 21410-1753 attached. Please forward to AOPS for payment in				
11	January 8, 2015 Check Run.				
12					
13					

Purchases Charged to Categorical Programs, Grants or Special Projects
 This purchase is in compliance with the requirements of Lottery
 Program Name 700P For grants/special projects _____
 Program Director/Coordinator Signature _____ Project/Grant Number _____
 Program Goal/Objective Number/Explanation _____

Sales Tax **\$71.88**
Total **\$1397.13**

I hereby certify the items/services listed above shall be obtained in accordance with District Policy, Conflict of Interest Code, P-8611, and all other applicable district, state and federal policies, rules, regulations and laws.

REQUESTED BY: R. Russo TYPED/PRINT _____ DATE 11/12/14
 REQUESTED BY: _____ SIGNATURE _____ DATE 11/12/14
 AUTHORIZED: _____ DEAN OR AUTHORIZED SIGNATURE _____ DATE 11-12-14

GENED / 4300 / 12 / FL.VI. AR07

Bus. Unit	Account	*Fund	Org	
<u>10070</u>	<u>00000</u>	<u>2015</u>	<u>700P</u>	\$ <u>1397.13</u>
Program	Sub-Class	BY	Proj/Grnt	Amount
	/	/	/	
Bus. Unit	Account	*Fund	Org	
	/	/	/	\$
Program	Sub-Class	BY	Proj/Grnt	Amount

APPROVED: _____ VICE PRESIDENT, ADMINISTRATION _____ DATE _____

GS #127 05/13 **Instructions on Reverse**

* Asset Location - Equipment purchases over \$200 (Accts: 6480, 6490, 6491, 6493, 6495) complete the area below indicating the final assigned location of equipment.

Location Code _____ Dept. _____
 Building _____ Room No. _____



Invoice

Date	Invoice #
10/31/2014	21410-1753

Bill To:

Folsom Lake College
 1919 Spanos Court
 Folsom CA 95825-3981

Acct Rep	Order Date	P.O. Number		Payment Terms	Ship Via	Due Date
LIB	10/10/2014			2% 10, Net 30	USPS	11/30/2014
Quantity	Item Code	DTI	Description		Part#	Amount
6,100	Print-Ta...	10.0	Falcon's Eye Theatre Mailer			848.50T
1	Mail-Add...	7.5	Mailing Services			426.75
500	Print-Ta...	10.0	Over's on Mailer			50.00T
		Start No.	n/a	End No.	n/a	Sales Tax (8.0%) \$71.88

Thank You For Your Business!

We also accept



- * The use of a credit card to pay this invoice voids any prompt payment discount.
- * Credit card payment for postage and/or shipping will be subject to a 4% surcharge.
- * 2% Discount not available for shipping or postage costs.

Please Remit Payment To:
Tri-City Technologies
2615 Del Monte Street
West Sacramento CA 95691
888-928-7828 - Toll Free

Please visit us at www.TriCityTech.net

Total	\$1,397.13
Pmt / Credit	\$0.00

Balance Due
\$1,397.13

Balances not paid within 45 days from the invoice date will accrue a late charge of 1.5% per month.

21410-1753 Folsom Lake College
 REQ# 808623 TRI-CITY TECH

COPY

United States Postal Service

Post Office: Note Mail Arrival Date & Time
 (Do Not Round-Stamp)

Postage Statement - Nonprofit Standard Mail

JA Falcon's Eye Brochure

Mailer	Permit Holder's Name and Address and Email Address, if Any Folsom Lake College 10 College Parkway Folsom, CA 95630-6798	Telephone	Name and Address of Mailing Agent (If other than permit holder) Tri-City Technologies Andrey Yegin 2615 Del Monte St W Sacramento, CA 95691-3809	Telephone 916-503-5300	Name and Address of Mail Owner (If other than permit holder) FLC BSO to process JE Chargeback for Postage used from FLC Bulk Mail Account _ Permit# 41.
	USPS Nonprofit Auth. No. <u>555123</u> CAPS Cust. Ref. No. CRID <u>6286725</u>			CRID <u>5393731</u>	USPS Nonprofit Auth. No. CRID

Mailing	Post Office of Mailing Folsom, CA 95630-9998	Processing Category <input checked="" type="checkbox"/> Letters <input type="checkbox"/> Catalogs <input type="checkbox"/> Flats <input type="checkbox"/> Marketing Parcels <input type="checkbox"/> Parcels - Mailable <input type="checkbox"/> Parcels - Irregular <input type="checkbox"/> CMM	Mailer's Mailing Date Oct 23, 2014	Federal Agency Cost Code	Statement Seq. No. 111533	No. and Type of Containers 0 Sacks 18 1 ft. Letter Trays 3 2 ft. Letter Trays 0 EMM Letter Trays 0 Flat Trays 0 Pallets 0 Other
	Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered	SSS Transaction #	Weight of a Single Piece 0.0250 pounds	Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class	Total # of Pieces in Mailing 6,006	Total Weight 150.1500
Permit # 41	For Mail Enclosed within Another Class <input type="checkbox"/> Periodicals <input type="checkbox"/> Mailpiece is a product sample. <input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail <input type="checkbox"/> Media Mail				% Samples	

For Automation Pieces, Enter Date of Address Matching and Coding 10/23/2014	For Carrier Route Pieces, Enter Date of Address Matching and Coding 10/23/2014	For Carrier Route Price Pieces, Enter Date of Carrier Route Sequencing 08/23/2013	For Pieces Bearing a Simplified Address Enter Date of Delivery Statistics File or Alternative Method
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Move Update Method: Ancillary Service Endorsement NCOA Link ACS Alternative Method Multiple OneCode ACS n/a Alternative Address Format

This is a Political Mailing Yes No This is Official Election Mail Yes No Letter-size or flat mailpiece contains DVD/CD or other disk.

Parts Completed (Select all that apply) <input checked="" type="checkbox"/> A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> S <input type="checkbox"/> NSA																
Postage	<table border="1"> <tr> <td>1</td> <td>Subtotal Postage (Add Parts Totals)</td> <td>\$897.33</td> </tr> <tr> <td>2</td> <td>Price at Which Postage Affixed (Check one). Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither pcs. x \$ = Postage Affixed</td> <td>-</td> </tr> <tr> <td>3</td> <td>Incentive/Discount Flat Dollar Amount:</td> <td>-</td> </tr> <tr> <td>4</td> <td>Fee Flat Dollar Amount:</td> <td>+</td> </tr> <tr> <td>5</td> <td>Permit # 41 Net Postage Due (Line 1 +/- Lines 2, 3, 4)</td> <td>\$897.33</td> </tr> </table>	1	Subtotal Postage (Add Parts Totals)	\$897.33	2	Price at Which Postage Affixed (Check one). Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither pcs. x \$ = Postage Affixed	-	3	Incentive/Discount Flat Dollar Amount:	-	4	Fee Flat Dollar Amount:	+	5	Permit # 41 Net Postage Due (Line 1 +/- Lines 2, 3, 4)	\$897.33
1	Subtotal Postage (Add Parts Totals)	\$897.33														
2	Price at Which Postage Affixed (Check one). Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither pcs. x \$ = Postage Affixed	-														
3	Incentive/Discount Flat Dollar Amount:	-														
4	Fee Flat Dollar Amount:	+														
5	Permit # 41 Net Postage Due (Line 1 +/- Lines 2, 3, 4)	\$897.33														

USPS Use	Additional Postage Payment (State reason) For postage affixed, add additional payment to net postage due; for permit imprint, add additional payment to total postage.	Total Adjusted Postage Affixed
	Postmaster Report Total Postage in: AIC 125 (Permit Imprint Only, Excluding Simplified Addressing (EDDM))	Total Adjusted Postage Permit Imprint
	Postmaster Report Total Postage in: AIC 208 (Simplified Addressing (EDDM), Permit Imprint Only)	Total Adjusted Postage Simplified Addressing (EDDM)

Incentive/Discount Claimed: _____ Type of Fee: _____

The mailer's signature certifies that: (1) the mailing complies with DMM 703; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. 3628(j)(1)(d)(ii)(I) and 26 U.S.C. 513(A); (3) the mailing if made by a voting registration official is required or authorized under the National Voter Registration Act of 1993; and (4) it will agree to pay, subject to appeal, any revenue deficiencies assessed on this mailing. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control. The mailer hereby certifies that all information furnished on this form is accurate, truthful and complete; that the mail and supporting documentation comply with all postal standards and that the mailing qualifies for the prices and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation. I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Privacy Notice: For information regarding our Privacy Policy visit www.usps.com.

Signature of Mailer or Agent Andrey Yegin	Printed Name of Mailer or Agent Signing Form Andrey Yegin	Telephone 916-503-5300
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USPS Use Only To be completed in non-Posta/One! sites	Weight of a Single Piece 0. pound	Are postage figures at left adjusted from mailer's entries? If yes, reason <input type="checkbox"/> Yes <input type="checkbox"/> No
	Total Pieces _____ Total Weight _____	
	Total Postage _____	
	Presort Verification Performed? (If required) <input type="checkbox"/> Yes <input type="checkbox"/> No (Check one)	Date Mailed Notified _____ Contact _____
	I CERTIFY that this mailing has been inspected for each item below if required: (1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; (4) payment of annual fee; and (5) sufficient funds on deposit (if required).	By (Initials) _____ Time _____ AM _____ PM _____
USPS Employee's Signature _____	Print USPS Employee's Name _____	Round Stamp (Required) Payment Date _____



QUOTATION

Proposed To: Folsom Lake College Date 10/31/14

Project Description:
Falcon's Eye Theatre Mailer Quantity 6100 + Overs @ 500

Creative Services:	Cost:
File provided by client Print Ready Format	
TCT to pre-flight files as needed	N/A

Copy/Print Services:	Cost:
Prints 4 Color Process 2/sides on #100 Gloss Book	Quantity 6100 \$848.50*
	Overs Quantity 500 \$50.00*

Mail Services:	Cost:
Mailing Services from supplied list, Delivered to Folsom Post Office	\$426.75
Postage Paid on College Permit	

****Does not include postage.**

Special Note: All postage must be received at TCT or deposited with USPS PRIOR to the drop of mail.

Fulfillment Services:	Cost:
	N/A

Terms: ON NEW ACCOUNTS: 50% deposit with balance due prior to delivery.
 ON OPEN ACCOUNTS: 2% 10, Net 30, from date of invoice. A service charge of 1 1/2 % per month will be charged on the unpaid balances 30 days after month of invoice. (18% annual rate.)
 *NOTE: Plus applicable California Sales and Use Tax.

Customer: Acceptance of this quotation is an agreement between Tri-City Technologies and the undersigned and is subject to our standard terms and conditions which appear on the reverse. Buyer agrees that in an event suit is necessary to recover payment of the purchase price, buyer will pay seller's attorney fees and costs, including attorney fees for appeal.

Quotation subject to change after 30 days.

By _____ By Larry Brittain
 (Client Signature) Tri-City Technologies



Spring Awakening (2014)



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eighth season
of exciting
theatre!



The Crucible (2013)



SPECIAL

ONEEER



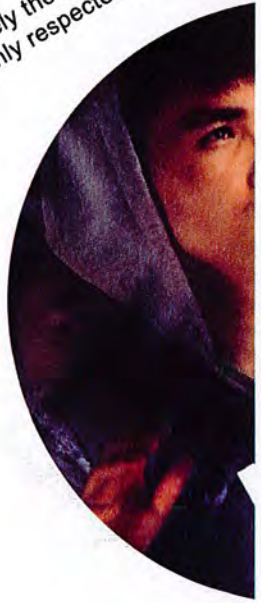
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by Naomi Iizuka

This fall The Falcon's Eye is excited to bring you an adaptation of Homer's "The Odyssey" unlike anything you've seen or read through a dizzying and mysterious world on that same long home. Will he find the America that he has so long dreamed of?

Absolutely the **MUST SEE** of the season
Written by highly respected playwright Dr. Naomi Iizuka



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FOR THE PRICE OF ONE!**

Enter the promo code "NAOMI" when buying tickets online, by phone, or in person at the Harris Center ticket office and you will receive A SECOND TICKET FREE (facility fees not included)

From: [Haney, Brenda](#)
To: [Williams, David](#)
Cc: [Russo, Renee](#)
Subject: FOR YOUR ACTION _ TRI-CITY TECHNOLOGIES_ FW: Change Order Request Tri-Cities
Date: Wednesday, November 12, 2014 9:33:44 AM
Attachments: [Re REQUEST FOR QUOTES FOR THEATRE ARTS TRI-FOLD BROCHURE PRINTING W MAILING SERVICE .msg](#)
[RE Tri-City.msg](#)
[0001074758 TRI-CITY TECHNOLOGIES.PDF](#)
[Change Order request Tri-Cities.doc](#)

Good Morning David –

Your Area cannot request a Change Order for PO_0001074758 for the following reasons:

- 1) PO_0001074758 is/was a FY 2014 PO (Not for College-Wide Use - it was issued as a one-time PO for a specific job ordered through PISO).
- 2) PO_0001074758 is/was Closed March 2014.
- 3) This Change Order Request has been voided.

If you wish to have a PO issued to Tri-City for a TA order - your Area will need to submit a new requisition (see attached Instructions emailed to you on 9/24 and to Renee on 11/6):

“Once you have an acceptable quote – prepare and submit a requisition. Once BSO receives your completed REQ and budget check passes – it can be submitted for Purchase Order.”

- Attach a copy of your Tri-City quote to the REQ.
- In Addition: As I understand from PISO this TA order has already been printed and mailed.
 - That being the case - a Letter of Explanation for Unauthorized Purchase will now be required with your REQ – as Purchase Order as not requisitioned and Issued by LRCCD Purchasing or FLC BSO prior to services being rendered.
- Payment to Tri-City cannot be authorized until all of the above items are received and DO Purchasing approves an Authorized PO.

Thank you,

Brenda Haney

Business Services

Folsom Lake College | 10 College Parkway | Folsom, CA 95630

☎ 916.608.6635 | ✉ haneyb@flc.losrios.edu

From: Williams, David

Sent: Monday, November 10, 2014 12:00 PM

To: Haney, Brenda

Cc: Russo, Renee; Williams, David

Subject: Change Order Request Tri-Cities

Brenda,

Please find an attached Change Order. Thank you for your help.

David Williams, Ph.D.

Dean, Planning & Research and Visual & Performing Arts

PAC-2260 (Harris Center)

Folsom Lake College

10 College Parkway, Folsom, CA 95630

Office: 916.608.6752

From: Russo, Renee

Sent: Monday, November 10, 2014 10:46 AM

To: Williams, David

Subject: Change Order Request Tri-Cities

Tri-Cities -