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.

PURCHASE ORDER NO CHANGE ORDER

B115318

Date	Revision	Page
07/03/2014	1 - 12/09/2014	1
Payment Terms	Freight Terms	Ship Via
NET 30 Sh	ipping Point	Best Metho
Reference:		Location / Dept
767742 HANSEN M KB POONV		04ASPH52

Vendor: 0000031740

MCKESSON MEDICAL-SURGICAL INC

8741 LANDMARK RD RICHMOND VA 23228

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	041A BLANKET PURCHASE ORDER FOR HEALTH SERVICES SUPPLIES (CUSTOMER #3868707 - FLC) 7/1/14 - 6/30/15	1.00 EA	300.00	300.00	05/01/2015
2- 1	041X BLANKET PURCHASE ORDER FOR HEALTH SERVICES SUPPLIES (CUSTOMER #3868707 - FLC) 7/1/14 - 6/30/15	1.00 EA	283.00	283.00	05/01/2015

AUTHORIZED PERSONNEL:
MARY HANSEN
BRYON BELL
KIM CARRILLO
DEBORAH WHITNEY (REMOVE 12/2014)
MELANIE DIXON
VALERIE ADGER (EFF 12/2014)
FAX PO 916-608-6787
ATTN: BEVERLY BLACK
ENCLOSE CUSTOMER APPLICATION & QUESTIONNAIRE

FY 14 PO B114672

12/9/14 CLOSE LINE 1 ADD - LINE 2 FOR \$283.00 AGAINST PROJ/GRT 041X - REMOVE DEBORAH WHITNEY FROM AUTHORIZED SIGNERS LIST AND ADD VALERIE ADGER FOR A NEW PO TOTAL OF \$583.00 PER J.HARMAN - KJK

Sub Total Amount Sales Tax Amount Total PO Amount 583.00 0.00 583.00

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

12-12-4

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.

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

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PURCHASE ORDER NO CHANGE ORDER

B115318

Date	Revision	Page
07/03/2014	1 - 12/09/2014	2
Payment Terms	Freight Terms	Ship Via
NET 30 Sh	ipping Point	Best Metho
Reference:		cation / Dept
767742 HANSEN M KB POONV		ASPH52

Vendor: 0000031740 MCKESSON MEDICAL-SURGICAL INC

8741 LANDMARK RD **RICHMOND VA 23228**

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

Line-Sch	1		Item/Description	on				Quant	ity UON	1 PO Price	Extended Amt	Due Date
<u>3U</u>	Acct	<u>Fd</u>	Org	Prog	Sub	<u>Proj</u>	<u> </u>	Amount		BYear		
SENFD	4500	11	FL.VS.HLTH	64400	00000	041A	30	00.00		2015		
GENFD	4500	11	FL.VS.HLTH	64400	00000	041X	28	83.00		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

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.

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BLANKET PO - CHANGE ORDER REQUEST

One Purchase Order per Form

PO HEADER - COMPLETE ALL SECTIONS:

VENDOR NAME: MCKESSON MEDICAL VENDOR#: 31740

ADD A NEW PO LINE & BUDGET - COMPLETE AMT, DESC, AND BUDGET CODE:

ADD NEW PO LINE - AMOUNT: \$283.00

NEW LINE: DESCRIPTION:

BLANKET PURCHASE ORDER FOR HEALTH SERVICES SUPPLIES (CUSTOMER #3868707 - FLC)

7/1/14 - 6/30/15

NEW LINE **BUDGET:** GENFD 4500 11 FL.VS.HLTH 64400 00000 2015 041X

FUND 12 Requirement – Complete if adding new department org, or project/grant#:

Program Name: Project/Grant Number:

Program Director/Coordinator Signature:

CHANGE AREA/DEPT AUTHORIZATIONS:

ADD AUTHORIZED PERSONNEL: VALERIE ADGER

□ DELETE AUTHORIZED PERSONNEL: DEBORAH WHITNEY

NEW PO TOTAL = \$535.73

REQUESTED BY: CARRILLO/HANSEN DEPT: HLTH SRVC

DO NOT SEND CHANGE ORDER TO VENDOR - (For BSO Use Only)

PURCHASING: (916) 568-3071 ACCOUNTING: (916) 568-3065 FAX: (916) 568-3145

PLEASE SEE REVERSE SIDE FOR SPECIAL INSTRUCTIONS, TERMS AND CONDITIONS.

PURCHASE ORDER NO

B115318

Date	Revision	Page
07/03/2014		1
Payment Terms	Freight Terms	Ship Via
NET 30 Sh	ipping Point	Best Metho
Reference:		Location / Dept
767742 HANSEN N	I KB POONV	04ASPH52

Vendor: 0000031740

MCKESSON MEDICAL-SURGICAL INC

8741 LANDMARK RD RICHMOND VA 23228

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	BLANKET PURCHASE ORDER FOR HEALTH SERVICES SUPPLIES (CUSTOMER #3868707 - FLC)	1.00 EA	300.00	300.00	05/01/2015

AUTHORIZED PERSONNEL: MARY HANSEN BRYON BELL KIM CARRILLO DEBORAH WHITNEY MELANIE DIXON

FAX PO 916-608-6787 ATTN: BEVERLY BLACK ENCLOSE CUSTOMER APPLICATION & QUESTIONNAIRE

FY 14 PO B114672

Sub Total Amount Sales Tax Amount Total PO Amount 300.00 0.00 300.00

BU GENFD Acct Fd 4500 11 Org FL.Vs.HLTH

Prog 64400

<u>Sub</u> 00000 Proj 041A Amount 300.00 BYear 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

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

DRWalelen 7/10/2014

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.

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.
- ROB 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 <u>may</u> 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 <u>may</u> 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.

Los Rios Com	munity College D	eistrict 2015
1 ago	Requisition	Req. No. 767742
Vendor Code DATE 5 12 14		P.O.NO.
31740 VINDOR 11 CKASCIAN Alas	2014, MAY 13 A 11: 311	DELIVERY INSTRUCTIONS
	1 (/)	Old death 50
	lauk Rd, P.O. BOX 27452	Location Code
F.O.B. CITY RICHMAND ST	TATE VA ZIP 23228 FL	C HCTH trict Location Department
PHONE (804) 264-7500 F	ax(804)264-3122 5TUD	, 6VCS.
DESCRIPTION	ORDERED ORDERED	Date Required AMOUNT
ITEM GIVE COMPLETE DESCRIPTION, INCLUDING *Use additional paper if necessary and please refere		T UNIT PRICE TOTAL PRICE
DO NOT USE A SECOND REQUIS	ITION.) k =
1 1570 tv 7/1/14-6/30	115, 1 6	A \$300
2 Health Service	5 Supplies	
3 (Custmen# 386 8707	J-FIC TBRO-Regi	eest Exception
4	to Standa	id limit.
5 Suth Pers!	BPO Necessary +	D Older
6 Mary Hansen	TB Antagen Qu	ichely when
7 Debrah Whitney	needed.	
8 Kim Carrillo	Fic Volume	dunial.
9 Welanie Dixon	less the en #1	040
10 Bryon Bell	With the second second	(/ 0 0
11		
12 Ry PO# B114672		
13		
Purchases Charged to Categorical Programs, Grants or Speci This purchase is in compliance with the requirements of	al Projects	SalesTax
For grants/speci	Program Name	£ 300,00
Program Director/Coordinator Signature	Project/Grant Number	Total 125.00
Program Goal/Objective Number/Explanation		
I hereby certify the items/services listed above are to be obta accordance with District Regulation 8323, Section 4, Conflict of Inter all other applicable district, state, and federal policies, rules, regulat	rest, and SENFU 190/ /F	=L.VS, HLTH
laws.	Bus. Unit Account Fund Or	9041A \$ 300,00
REQUESTED BY: TYPED/PRINT DATE	Program Sub-Class BY Pr	roj/Grnt Amount
Mary Hanses 5/12/	4 / / /	CAU.
REQUESTED BY: SIGNATURE DATE	Bus. Unit Account* Fund Or	.a
AUTHORIZED: DEAN OR AUTHORIZED SIGNATURE DATE,	Program Sub-Class BY Pr	\$ roj/Grnt Amount
Sethlew Suhlow 5/3	1/4 *Asset Location - For equipment purchases o	ver\$200 (Accounts 6490, 6495 and computers)
APPROVED: VICE PRESIDENT, ADMINISTRATION DATE	complete the area below indicating the fina	l location where equipment will be housed.
Instructions on Reverse	Location Code	Dept
GS #127 08/06	Building	Room No.
	stor: Pink Area Dean: Goldenrod	