

LOS RIOS COMMUNITY COLLEGE DISTRICT

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

PURCHASE ORDER NO 0001082359

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Date	Revision	Page
07/08/2015	1 - 07/17/2015	1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
1007000 JOHNSONC GALLARZOC	04OPER207 OPS	

Vendor: 0000006622
 CALTRONICS BUSINESS
 10491 OLD PLACERVILLE ROAD #150
 SACRAMENTO CA 95827

Phone: (916) 363-2666
Fax: (916) 340-7157

email: huertas@caltronics.net

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	SN: 56YE00477 KONICA KM1050 ID# A2084 LOCATED IN PRINTING SERVICES EST B/W 525,000 @ \$.006174 PLUS S/TAX ON 35%	1.00	EA	3,800.00	3,800.00	05/01/2016
2- 1	SN: A4EVO11000966 KOINCA KM1052 ID# 87702 LOCATED IN PRINTING SERVICES EST B/W 2,200,000 @ \$.004 PLUS S/TAX ON 35%	1.00	EA	10,000.00	10,000.00	05/01/2016
3- 1	SN: A50VO11000890 KOINCA C1060 ID# 7703 LOCATED IN PRINTING SERVICES EST B/W 50,000 \$.008 ALL SIZES EST COLOR 125,000 @.045 ALL SIZES PLUS S/TAX ON 35%	1.00	EA	6,800.00	6,800.00	05/01/2016

PERIOD: 7/1/15 TO 6/30/16
 MAINTENANCE AGREEMENT INCLUDES ALL PARTS, LABOR, PM, EMERGENCY REPAIRS, ALL CONSUMABLES EXCEPT PAPER
 AND STAPLES

PY PO#: 0001077189

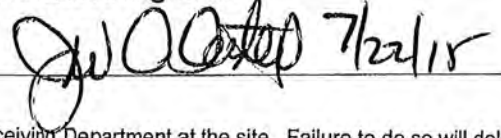
Sub Total Amount	20,600.00
Sales Tax Amount	0.00
Total PO Amount	20,600.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5600	11	FL.VA.PRNT	67900	00000	041A	20,600.00	2016

0001007000KIRKLINK26-JUN-2015

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



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.

✓

Requisition

Vendor: CALTRONICS BUSINESS
 10491 OLD PLACERVILLE ROAD #150
 SACRAMENTO CA 95827
 United States

Ship To: RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630

Business Unit: GENFD OPEN		
Req ID: 0001007000	Date 07/01/2015	Page 1
Requester Colleen R Johnson		Bldg# OPS
Requester Signature		
Buyer: Christina Gallarzo		
Approved: <i>[Signature]</i>		

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	SN: 56YE00477 KONICA KM1050 ID# A2084 LOCATED IN PRINTING SERVICESEST B/W 525,000 @ \$.006174 PLUS S/TAX ON 35%	1	EA	3,800.00	3,800.00	07/01/2015
2-1	SN: A4EVO11000966 KOINCA KM1052 ID# 87702 LOCATED IN PRINTING SERVICESEST B/W 2,200,000 @ \$.004 PLUS S/TAX ON 35%	1	EA	10,000.00	10,000.00	07/01/2015
3-1	SN: A50VO11000890 KOINCA C1060 ID# 7703 LOCATED IN PRINTING SERVICESEST B/W 50,000 \$.008 ALL SIZES EST COLOR 125,000 @.045 ALL SIZES PLUS S/TAX ON 35%	1	EA	6,800.00	6,800.00	

Total Requisition Amount: 20,600.00

PERIOD: 7/1/15 TO 6/30/16

MAINTENANCE AGREEMENT INCLUDES ALL PARTS, LABOR, PM, EMERGENCY REPAIRS, ALL CONSUMABLES EXCEPT PAPER AND STAPLES

PY PO#: 0001077189

<u>BU</u>	<u>Acct</u>	<u>Fd</u>	<u>Org</u>	<u>Prog</u>	<u>Sub</u>	<u>Proj</u>	<u>Amount</u>
GENFD	5600	11	FL.VA.OPFC	67900	00000	041A	20,600.00

PART

Approval Signature	Approval Signature <i>[Signature]</i>	Approval Signature
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Prestige Managed Service Monthly Agreement

Company Name: Folsom Lake College

Address: 10 College Parkway Folsom CA 95630

Meter Contact: _____ FAX #: _____

Meter e-mail: _____

Start Date: 7/1/2015 To: 6/30/2016

****QUARTERLY BILLING****

ID#	Model	Serial #	Color Per Copy Rate	B/W Per Copy Rate	Contracted Usage		Starting Meter
A2084	1050	56YE00477		.006174	C:	B:	
					C:	B:	
					C:	B:	
					C:	B:	
					C:	B:	

Caltronics Guarantees

- ▶ This agreement assures that the equipment will be serviced by factory trained field technicians and includes all service, parts and supplies.
- ▶ Parts and Supplies - Caltronics uses only OEM and top quality supplies to service and supply your system.
- ▶ Free Loaner - Caltronics will provide a free loaner of equal or greater capability in the event that it cannot be repaired onsite.
- ▶ Call Ahead Program - A technician will call you within two business hours of receiving your service request. If the issue cannot be resolved by phone, you will be given an estimated time of arrival.

Pricing does not include paper, staples, applicable taxes and freight charges.

Power requirements may include a dedicated line and receptacle as described on the Site Requirements Form.

Customer Acceptance: _____

Caltronics Acceptance: _____

Date: _____

Date: _____



Customer Bill To: Los Rios Community College
 Address: 1919 Spanos Court
 City: Sacramento
 State: CA Zip: 95825

Prestige Maintenance Agreement

Primary Contact

Name:
 Phone:
 Email:

Meter Contact

Name:
 Phone:
 Email:

Start Date: to

Billing Cycle

Monthly Quarterly Annual

ID #	Model	Serial Number	Per Copy Rate		Contracted Usage		Starting Meter
			Color	B/W	Color	B/W	
87702	1052	A4EVO11000962		0.004			
87703	C1060	A50V011000890	0.045	0.008			

Caltronics Guarantee

- ▶ This agreement assures that the equipment will be serviced by factory trained field technicians and includes all service, parts and supplies.
- ▶ Parts and Supplies - Caltronics uses only OEM and top quality supplies to service and supply your system.
- ▶ Free Loaner - Caltronics will provide a free loaner of equal or greater capability in the event that it cannot be repaired onsite.
- ▶ Call Ahead Program - A technician will call you within two business hours of receiving your service request. If the issue cannot be resolved by phone, you will be given an estimated time of arrival.

Pricing does not include paper, staples, applicable taxes and freight charges.

Power requirements may include a dedicated line and receptacle as described on the Site Requirements Form.

Authorization / Acceptance

Customer Authorization

Signature: Print Name: Title: Date:

Accepted by Caltronics Business Systems

Signature: Print Name: Title: Date:

Los Rios Community College District FY 2016

Requisition

Page _____ of _____

Req. No. **815687**

P.O. No.

Vendor Code
6622
Approved by / Date
Reviewed by / Date
Dispatched Method / Date

DATE 6/1/15 VENDOR Caltronics Business
 ADDRESS 10491 Old Placerville Rd
 CITY Sacramento STATE CA ZIP 95827
 E-MAIL sickt@caltronics.net
 PHONE _____ FAX _____

DELIVERY INSTRUCTIONS	
04 OPER 207	Building Name
FLC	printing
College/District Location	Department
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	56Y00477, KM 1050, ID A2084 located	1	ea		3800.00
2	in printing. Est. B/W 525,000 @				
3	.006174 plus tax on 35%.				
4	A4EVO11000966, KM 1052, ID 87702	1	ea		10,000
5	located in printing. Est. B/W				
6	2,200,000 @ .004 plus tax on 35%				
7	A50V011000890, KM C1060, ID 87703	1	ea		6,800.00
8	located in printing.				
9	Est B/W; 50,000 @ .008 all sizes				
10	Est color; 125,000 @ .045 all sizes				
11	plus tax on 35%				
12	Maintenance agreement billed quarterly, includes all parts, labor, PM,				
13	emergency repairs, and consumables except staples and paper 7/1/15-6/30/16				
Purchase Charged to Categorical Programs, Grants or Special Projects					
This purchase is in compliance with the requirements of _____ <small>Program Name</small>					Tax
Program Director/Coordinator Signature _____ For grants/special projects _____ <small>Project/Grant Number</small>					Total
Program Goal/Objective Number/Explanation _____					20,600.00

I hereby certify the items/services listed above are to 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: Kathy Barnes Liguori 6/1/15
TYPED/PRINT DATE

REQUESTED BY: Kathy Barnes Liguori 6/1/15
SIGNATURE DATE

AUTHORIZED: [Signature] 6/2/15
DEAN OR AUTHORIZED SIGNATURE DATE

APPROVED: _____ VICE PRESIDENT, ADMINISTRATION DATE _____

Genfd / 5600 / 11 / FL-VA, PRNT				
Bus. Unit	Account	*Fund	Org	
67900	10000	10	041A	\$ 20,600.00
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 6480, 6490, 6491, 6493, 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

GS #127 02/14
 District Office: White

College Requesting: Yellow

Requestor: Pink

Area Dean: Goldenrod