

**FOLSOM LAKE COLLEGE
REVOLVING FUND ACCOUNT**

10 College Parkway • Folsom, CA 95630
P: (916) 608-6549

CHECK NO. **FL-01587**

GENFD: NOT TO EXCEED \$500
VENDOR NO. 0000003279
LOCATION 09

CBFUND: NOT TO EXCEED \$1,000
VENDOR NO. 0000000001

DATE

TO COSTCO

1800 CAVITT CT
FOLSOM CA 95630

REQUISITIONED BY F3065 RUSSO / SENEAL

GENFD	5200	11	FL.VA.PROJ	66000	00000	2016	101E	NTE \$6.00 <i>10.19</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
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QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EST. TOTAL AMOUNT
		BOTTLED WATER FOR OIR FOCUS GROUP 11/6/15		
		THIS CHECK NOT TO EXCEED \$6.00 <i>10.19 approved.</i>		
RECEIVED BY: _____				
DATE: _____				

FOLSOM LAKE COLLEGE REVOLVING FUND ACCOUNT 10 College Parkway • Folsom, CA 95630 (916) 608-6549	BANK OF AMERICA GOVERNMENT BANKING	CHECK No. FL-01587
		DATE: November 4, 2015
Pay to the order of: COSTCO *****	\$ <u>6.00</u> <i>10/19</i>	11-35 1210
_____ <i>Tom B. 10/19/15</i>	DOLLARS	*THIS CHECK VOID 6 MONTHS FROM DATE DRAWN
NON-NEGOTIABLE		



Folsom #765
1800 Cavitt Court
Folsom, CA 95630
(916) 850-1000

H6 Member 32271872020
** Begin Bottom Of Basket
** Bottom Of Basket Item Count 0
E 998876 TOPK WATER 6.69
E 7000000000 CA REDEMP VA 3.50
SUBTOTAL 10.19
TAX 0.00
**** TOTAL 10.19
Check/Member Writn 10.19
CHANGE 0.00

TOTAL NUMBER OF ITEMS SOLD = 1

~~170:72015~~ 14:47 765 8 244 154

OP#: 154 Name: Mike B.

Thank You!

Please Come Again

Whse:765 Trn:8 Trn:244 OP:154



LIMITED PURCHASE ORDER

(Not to Exceed \$200.00)

VENDOR NAME AND ADDRESS:

COSTCO
1800 CAVITT DR
FOLSOM, CA 95630

DELIVERY INSTRUCTIONS: Deliver to Address Below
 Will Call

Pick-up AT COSTCO
NLT 11/5/15

FL01587

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	1 CASE OF KIRKLAND				6.50	6.50
2	WATER 16 OZ	1	CASE		5.39	5.39
3	CA Redempt	1			3.50	3.50
4	Blended White Swiss Tofu					
5	PLANTER	1	OR		3.50	3.50
6						
7	FOCUS GROUP ON 11/6 (HIGH SCHOOL					
8	SUPERINTENDENT) - REFRESHMENTS					
9	AUTHORIZED PURCHASER: ROYCE RUSSO					
10						10.19

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

SUB-TOTAL

SALES TAX

TOTAL

(Not to Exceed \$200.00)

10.19

5.39

2.43

5.82

10.19

Program Name _____
For grants/special projects _____
Program Director/Coord. Signature _____ Project/Grant Number _____
Program Goal/Objective Number/Explanation _____

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.

Received by _____ Date _____

REQUESTED BY: Royce Russo TYPED/PRINT DATE: 11-4-15

Bus. Unit Account Fund Org: GENFD 5200 / 11 / FL.VA. PROJ

REQUESTED BY: Royce Russo SIGNATURE DATE: 11-4-15

Program Sub-Class BY Proj/Grnt Amount: 66000 / 00000 / 2016 / 101E \$ 10.19

APPROVED: [Signature] DEAN OR OTHER AUTHORIZED SIGNATURE DATE: _____

Bus. Unit Account Fund Org: _____

APPROVED: [Signature] VICE PRESIDENT, ADMINISTRATION DATE: 11/5/15

Program Sub-Class BY Proj/Grnt Amount: _____