

**FOLSOM LAKE COLLEGE
REVOLVING FUND ACCOUNT**

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

CHECK NO. **FL-01625**

DATE **3/4/2016**

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

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

TO Cordova Community Council Foundation
2729 Prospect Park Drive, Suite 117
RANCHO CORDOVA, CA 95670

REQUISITIONED BY
REQ/815530 Heiland/Pactol

GENFD	5300	11	FL.VI.RCOR	60100	00000	2016	041A	50.00
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
1.00	EA	2016 CCC Organization Membership Renewal	50.000	50.00

RECEIVED BY: _____

DATE: _____

<p>FOLSOM LAKE COLLEGE REVOLVING FUND ACCOUNT 10 College Parkway • Folsom, CA 95630 (916) 608-6549</p>	<p>BANK OF AMERICA GOVERNMENT BANKING</p>	<p>CHECK No. FL-01625</p>
<p>Pay to the order of: Cordova Community Council Foundation</p>	<p>DATE: <u>March 4, 2016</u></p>	<p>11-35 1210</p>
<p>FIFTY AND 00/100 *****</p>	<p>\$ 50.00</p>	<p>THIS CHECK VOID 6 MONTHS FROM DATE DRAWN</p>
<p>DOLLARS</p>	<p>NON-NEGOTIABLE</p>	



CORDOVA COMMUNITY COUNCIL

2729 Prospect Park Drive, Suite 117
Rancho Cordova CA 95670
(916) 273-5704
melody@cordovacouncil.org

Invoice

2016 CCC Organization Membership Renewal

Invoice #: 201602

Date: 2/01/2016

Customer ID: Renewal

Thank you for your support of the Cordova Community Council. Please remit \$50.00 for the renewal of your CCC Organization Membership. The Cordova Community Council Foundation is a 501 c 3 charitable organization EIN 20-8488524. Part or all of your contribution may be tax deductible. Please consult your tax advisor.

Thank you!

REMITTANCE

Customer ID: **Renewal**

Due Date: **3/01/16**

Amount Due: **\$50.00**

Amount

Enclosed:

**Send to: Cordova Community Council Foundation
2729 Prospect Park Dr, Ste 117
Rancho Cordova, CA 95670**

For Payment via Credit Card, please provide the following information:

Card Holder Name: _____

Mailing address associated with card: _____

Credit card number: _____

Expiration Date: _____ 3 digit code on back of card: _____

Type of card (circle one): Visa / Mastercard

Los Rios Community College District

Requisition

Page 1 of 1

Req. No. **815530**

P.O. No. _____

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

DATE 2-26-16 VENDOR Cordova Community Council
 ADDRESS 2729 Prospect Dr. STE#117
 CITY Pancho Cordova STATE CA ZIP 95070
 E-MAIL _____
 PHONE 916-273-5704 FAX _____

DELIVERY INSTRUCTIONS	
Building Name <u>FIC - FCC</u>	
College/District Location	Department
Division	Date Required

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, ITEM NUMBER, COLOR & SIZE	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	<u>ANNUAL MEMBERSHIP RENEWAL</u>	1		\$50.00 <u>\$50.00</u>	<u>\$50.00</u>
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

Purchases Charged to Categorical Programs, Grants or Special Projects		Tax	<u>—</u>
This purchase is in compliance with the requirements of _____ Program Name _____		Total	<u>\$50.00</u>
Program Director/Coordinator Signature _____	For grants/special projects _____ Project/Grant Number _____		
Program Goal/Objective Number/Explanation _____			

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: JOYCE HAYLAND TYPED/PRINT DATE 2-26-16
 REQUESTED BY: [Signature] SIGNATURE DATE 2-26-16
 AUTHORIZED: [Signature] DEAN OR AUTHORIZED SIGNATURE DATE 2-26-16
 APPROVED: JOHNNY HARMAN VICE PRESIDENT, ADMINISTRATION DATE 3/7/16

Bus. Unit	Account	* Fund	Org	
<u>GENFD</u>	<u>15300</u>	<u>111</u>	<u>FLVIRCOA</u>	<u>\$50.00</u>
Program	Sub-Class	BY	Proj/Grnt	Amount
<u>60100</u>	<u>0000</u>	<u>2016</u>	<u>041A</u>	
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