

**FOLSOM LAKE COLLEGE
REVOLVING FUND ACCOUNT**

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

CHECK NO. **FL-01655**

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

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

DATE 5/6/2016

TO NAPA VALLEY COLLEGE
4C/SD Attn: Jan Schardt
2277 Napa - Vallejo Hwy
NAPA CA 94558

REQUISITIONED BY

GENFD	5300	11	FL.VI.STAF	67516	00000	2016	101L	125.00
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	2016-2017 Membership - CCCC for Staff & Organizational Development For Folsom Lake College	125.000	125.00

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-01655</p> <p>DATE: May 6, 2016</p>	<p>11-35 1210</p>
<p>Pay to the order of: 4C/SD *****</p>		<p>\$ 125.00</p>	
<p>One Hundred Twenty-Five and 00/100 *****</p>		<p>DOLLARS</p>	<p>*THIS CHECK VOID 6 MONTHS FROM DATE DRAWN</p>
<p>NON-NEGOTIABLE</p>			

California Community College Council for Staff and Organizational Development

2016 - 2017 Membership Invoice

COLLEGE/DISTRICT: Folsom Lake College

Institutional Membership: \$125.00

Institutional memberships cover all employees of a single college. Each institution of a multi-college District should join separately. Please PRINT the following information.

Contact Person Molly Senecal, Dean, Planning & Research
Address 10 College Parkway
City Folsom State CA Zip 95630
Telephone (916) 608 6688
E-Mail Senecam@FLC.losrios.edu
Staff Development Website _____

Staff and Organizational Development Representatives:

Administrator Molly Senecal
E-mail (see above)
Classified Wende Vander Werf
E-mail vanderw@FLC.losrios.edu
Faculty Coordinator David Hagold
E-mail hagold@FLC.losrios.edu
Classified Senate/Council President Vonnie Shane
E-mail ShaneV@FLC.losrios.edu
Academic Senate President Carlos Lopez
E-mail LopezC@FLC.losrios.edu

Make checks payable to 4C/SD and remit to:

**4C/SD ATTN: Jan Schardt
Napa Valley College
2277 Napa-Vallejo Highway
Napa, CA 94558**

Los Rios Community College District

Requisition

Page 1 of 1

Req. No. **815923**
 P.O. No. **FL01655**

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

DATE 5/5/16 VENDOR SSAA 4CSD
 ADDRESS Napa Valley College
2277 Napa Valley Highway
 CITY Napa STATE CA ZIP 94558
 EMAIL Attention Jan Schardt
 PHONE _____ FAX _____

DELIVERY INSTRUCTIONS
 Building Name
 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	2016 - 2017 membership				125.00
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

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

Tax
Total 125.00

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: Wenda Vander Werf TYPED/PRINT DATE 5/5/16

REQUESTED BY: Wenda Vander Werf SIGNATURE DATE 5/5/16

AUTHORIZED: Rachel Rosenthal DEAN OR AUTHORIZED SIGNATURE DATE 5/5/16

APPROVED: _____ VICE PRESIDENT, ADMINISTRATION DATE _____

5300

GenEd / STAF / 11 / FL VI STAF

Bus. Unit	Account	* Fund	Org	Amount
<u>69516</u>	<u>0000</u>	<u>2016</u>	<u>101L</u>	<u>125.00</u>
Program	Sub-Class	BY	Proj/Grnt	Amount
/	/	/	/	
Bus. Unit	Account	* Fund	Org	Amount
/	/	/	/	\$
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