LOS RIOS COMMUNITY COLLEGE DISTRICT

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 0001082360 CHANGE ORDER

Date	Revision	Page
07/08/2015	1 - 01/07/2016	1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:		Location / Dept
1006999 WURZ	FRIC BOUILLER'S	04EDCB119 AR

Supplier: 0000018967

TOSHIBA BUSINESS SOLUTIONS 1170 NATIONAL STE 60 SACRAMENTO CA 95834

Phone: Fax:

(916) 928-2713 (916) 928-2704

email: shane.pitto@tbs.toshiba.com

Ship To:

EL DORADO CENTER

RECEIVING

6699 CAMPUS DRIVE PLACERVILLE CA 95667

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	S/N C2HCS2442 MAINT AGRMNT: TOSHIBA STUDIO 206L COPIER ID # 30143 AT EDC A&R 04EDCB119 BILLED QUARTERLY BASE: \$24.00/QTR INC 3,000 B/W COPIES PER/QTR; OVERAGES AT \$0.012	1.00 LOT	336.00	336.00	07/01/2015
	PER COPY EST FOR 13,000 COPIES - (\$24.00 X 4) + (\$0.012 X 10.000) = \$216.00				

PERIOD: 07/01/15 ; 06/30/16 PRICES INCLUDE: ALL PARTS, LABOR, SERVICE CALLS, TONER, STAPLES AND PREVENTATIVE MAINTENANCE EXCLUDES. **PAPER**

EMAIL PURCHASE ORDER TO: Shane.Pitto@tbs.toshiba.com SIGNED AIMS MAINTENANCE CONTRACT # MA-1.0.0 ENCLOSED

PY PO#: 0001007718

01-07-16 INCREASE PO BY \$120.00 PER J HARMAN. NEW PO TOTAL \$336.00 - SR

DO NOT SEND TO VENDOR

Sub Total Amount Sales Tax Amount Total PO Amount

 336.00
0.00
336.00

BU GENED

FL.VS.ENRL

Proj

Amount 336.00

BYear 2016

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 Signatu

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.

Purchase Order / Change Order Request (One PO per Request)

PO#0001082360

Request Date: 01/07/16

College/Dept.: FLC

Vendor Name Toshiba Business Solutions

☐ Increase line 1 by \$120.00 to \$336.00

Per C. Wurzer

LOS RIOS COMMUNITY COLLEGE DISTRICT

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

0001082360

Revision Page Date 07/08/2015 Payment Terms Freight Terms Ship Via NET 30 Best Metho Shipping Point Reference: Location / Dept 1006999 WURZERC GALLARZOC 04EDCB119 AR

Vendor: 0000018967

TOSHIBA BUSINESS SOLUTIONS

1170 NATIONAL STE 60 SACRAMENTO CA 95834

Phone: (916) 928-2713

(916) 928-2704 Fax:

email: shane.pitto@tbs.toshiba.com

Ship To:

EL DORADO CENTER

RECEIVING

6699 CAMPUS DRIVE PLACERVILLE CA 95667

United States

Bill To:

1919 Spanos Court

Sacramento CA 95825-3981

United States

Tay Evamet?

Line-Sch	Item/Description	Quantity UOM	PO Price	Extended Amt	Due Date
1- 1	S/N C2HCS2442 MAINT AGRMNT: TOSHIBA STUDIO 206L COPIER ID # 30143 AT EDC A&R 04EDCB119 BILLED QUARTERLY BASE: \$24.00/QTR INC 3,000 B/W COPIES PER/QTR; OVERAGES AT \$0.012 PER COPY EST FOR 13,000 COPIES - (\$24.00 X 4) + (\$0.012 X 10,000) = \$216.00	1.00 LOT	216.00	216.00	07/01/2015

PERIOD: 07/01/15 06/30/16 PRICES INCLUDE: ALL PARTS, LABOR, SERVICE CALLS, TONER, STAPLES AND PREVENTATIVE MAINTENANCE EXCLUDES PAPER

EMAIL PURCHASE ORDER TO: Shane.Pitto@tbs.toshiba.com SIGNED AIMS MAINTENANCE CONTRACT # MA-1.0.0 ENCLOSED

PY PO#: 0001007718

Sub Total Amount Sales Tax Amount **Total PO Amount**

216.00 0.00 216.00

BU GENFD

Fd Acct 5600

11

Org FL. VS. ENRL

Sub Prog 62100 00000 Proj 051C

Amount

BYear

0001006999KIRKLINK26-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:

TOSHIBA BUSINESS SOLUTIONS 1170 NATIONAL STE 60 SACRAMENTO CA 95834

United States

Ship To:

RECEIVING 6699 CAMPUS DRIVE PLACERVILLE CA 95667

Business Unit:	GENFD	OPEN
Reg ID:	Date	Page
0001006999	07/01/2015	1
Requester		Bldg#
Christine Wurzer		AR
Requester Signature		
Buyer: Christi	na Gallarzo	
Approved: W	6/20/15	

Line-Schd	Description	Quantity	UOM	Price	Extended Amt Due Date
1-1	S/N C2HCS2442 MAINT AGRMNT: TOSHIBA	1	LOT	216.00	216.00 07/01/2015
1-0	CTUDIO 2001 CODIED ID # 20442 AT EDC	1	LOI	210.00	210.000

STUDIO 206L COPIER ID # 30143 AT EDC A&R 04EDCB119 BILLED QUARTERLY BASE: \$24.00/QTR INC 3,000 B/W COPIES PER/QTR; OVERAGES AT \$0.012 PER COPYEST FOR 13,000 COPIES - (\$24.00 X 4) + (\$0.012 X 10,000) = \$216.00

Total Requisition Amount:

216.00

PERIOD: 07/01/15 ¿ 06/30/16 PRICES INCLUDE: ALL PARTS, LABOR, SERVICE CALLS, TONER, STAPLES AND PREVENTATIVE MAINTENANCE EXCLUDES PAPER

EMAIL PURCHASE ORDER TO: Shane.Pitto@tbs.toshiba.com SIGNED AIMS MAINTENANCE CONTRACT # MA-1.0.0 ENCLOSED

PY PO#: 0001007718

Org Acct Fd Prog Sub Proj **Amount** GENFD 5600 11 FL.VS.ENRL 62100 00000 051C 216.00

TOSHIBA **BUSINESS SOLUTIONS**

Sales Representative:

Title:

SHANE PITTO

AIMS MAINTENANCE CONTRACT

MA-1.0.0

	SALES PACKET NUMBER DATE	
--	--------------------------	--

CUSTOMER INFORMATION	V			, -	oment made be at	ndonod dna c	xecuted for Networ
	e College- El Dorade	o Center	Bill to Number				
Billing Address:	o conego El Bolda	-	Phone #:	916-608-	6713 Evt	Fax #:	
Address 2:			Contact: Kimberly Carrillo			Customer PO #:	
City:	- State:	- Zip:	email:	Tambony	Ourmo	Todatomer 1 o	
INVOICE / METER COLLEC	TION INFORMATION	ON		I I			
Meter Collection: Automated Mete	er Read Electron	nic Invoicing: Yes	Invoid	ce Location: Cu	stomer Address	Term:	12 Months
TRANSACTION TERMS (Co	ATTACHED MAINT	ENANCE CONT	RACT SCH	EDULE FOR	DEVICE DETA	ILS	
				Minimum	Payment	Excess Per	Excess Billing
Pool Description	Type	Includes	Units	Payment	Frequency	Unit Charge	Frequency
Studio 206L SN C2HC52442	Black	3,000	Images	\$ 24.00	Quarterly	0.0120	Quarterly
Egmp 1D 30143							
	2-14						**
Eff 7/1/15-6/3	30/16						
					-		
		-					
DECLINATION Customer is declining maintena	nce on the equipment listed		um Payment	\$ 24.00			
Printed Name:	nee on the equipment noted	ubovo.	- 1	Sea			
Title:	Dat	e:		Signature:			
SPECIAL INSTRUCTIONS							
						2.11	
	ontract Coverage F	Period is effecti	ve 7-1-201	5 through 6-30	1-2016		
Maintenance Co				o unough o o	2010		The state of the s
							Action to the second
ACCEPTANCE THE TERMS AND CONDITIONS HE	EREOF ARE PART OF 1	THIS SERVICE AGE	REEMENT. BY	Y SIGNING THIS	CONTRACT, THE	CUSTOMER	ACKNOWLEDGES
THE TERMS AND CONDITIONS HE THAT THEY HAVE READ AND UND Customer agrees to pay the Minimum by Customer and TBS, it shall con	EREOF ARE PART OF TO DERSTAND THESE TER of Payment per transactionstitute a binding contra	MS. on terms, plus any E ct and is non-cance	excess Per Un	nit Charges for the Contract will begin	term of this Contra	act. When thi	s Contract is signed
THE TERMS AND CONDITIONS HE THAT THEY HAVE READ AND UND Customer agrees to pay the Minimum by Customer and TBS, it shall con acknowledge and agree that your electric states and the states of the sta	EREOF ARE PART OF TO DERSTAND THESE TER of Payment per transactionstitute a binding contra	MS. on terms, plus any E ct and is non-cance shall constitute an el	excess Per Un	ait Charges for the Contract will begin d original signature	term of this Contra	act. When thi ned by TBS	s Contract is signed below. You hereby
THE TERMS AND CONDITIONS HE THAT THEY HAVE READ AND UND Customer agrees to pay the Minimum by Customer and TBS, it shall con acknowledge and agree that your electric states and the states of the sta	EREOF ARE PART OF TO DERSTAND THESE TER IT Payment per transaction is stitute a binding contral ectronic signature below	MS. on terms, plus any E ct and is non-cance shall constitute an el	excess Per Un	nit Charges for the Contract will begin d original signature Toshiba	term of this Contra on the date sign for all purposes.	act. When thi ned by TBS	s Contract is signed below. You hereby

Title:

Date:

Effective Date:

Rios Community College District Requisition Req. No. Page 808016 Vendor Code P.O. NO. DATE 1896 **DELIVERY INSTRUCTIONS** Approved by / Date Reviewed by / Date Dispatched Method / Date ege/District Location DESCRIPTION **ORDERED AMOUNT** ITEM GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES QUANTITY UNIT PRICE **TOTAL PRICE** *Use additional paper if necessary and please reference requisition number. DO NOT USE A SECOND REQUISITION. C2HC52442 1 2 3 4 5 6 7 8 10 11 12 13 Purchases Charged to Categorical Programs, Grants or Special Projects SalesTax This purchase is in compliance with the requirements of Program Name For grants/special projects Program Director/Coordinator Signature Project/Grant Number Total Program Goal/Objective Number/Explanation I 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. Bus. Unit Account *Fund (0210V/0000 R016/05 QUESTED BY YPED/PRINT REQUESTED BY SIGNATURE Bus. Unit Account * Fund Org 3.15 DEAN OR AUTHORIZED SIGNATURE DATE Program Sub-Class BY Proj/Grnt Amount *Asset Location - For equipment purchases over \$200 (Accounts 6490, 6495 and computers) complete the area below indicating the final location where equipment APPROVED: VICE PRESIDENT, ADMINISTRATION DATE will be housed. **Location Code** Dept.

GS #127 08/12 District Office: White

College Requesting: Yellow

Instructions on Reverse

Requestor: Pink

Building

Area Dean: Goldenrod

Room No.