

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 0001090548

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Date	Revision	Page
12/20/2016	1 - 12/21/2016	1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
1008940 HANSEN SHEWMAKERN	04ASPH152 STUSVC	

Supplier: 0000003716
 MOORE MEDICAL CORP.
 PO BOX 4066
 FARMINGTON CT 06032-4066

Phone: (800) 234-1464
Fax: (800) 944-6667

email:

Ship To: FOLSOM LAKE COLLEGE
 RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630-6798
 United States

Bill To: 1919 Spanos Court
 Sacramento CA 95825-3981
 United States

Tax Exempt? N	Use Tax Applicable: Y	Line-Sch	Item/Description	Quantity UOM	PO Price	Extended Amt	Due Date
		1- 1	81831 - WIPES; SUPER SANI-CLOTH LARGE ORM	2.00 EA	5.95	11.90	12/29/2016
		2- 1	64097 - MEDICINE; MEDI-FIRST IBUPROF 200MG 250X2	1.00 EA	13.82	13.82	12/29/2016
		3- 1	26292 - FEMININE PADS; KOTEX REG MAXI PADS	2.00 EA	3.69	7.38	12/29/2016
		4- 1	77693 - DISPENSER; GLOVE DISPENSER 3 BOX	1.00 EA	16.95	16.95	12/29/2016
		5- 1	98721 - ALCOHOL PADS; ALCOHOL PREP PADS MMC STER/200	2.00 EA	1.62	3.24	12/29/2016
		6- 1	13389 - BAND-AIDS; BAND-AID FLEXIBLE #4444 1X3	2.00 EA	4.63	9.26	12/29/2016
		7- 1	57706 - KLEENEX; KLEENEX FACIAL TISSUES WHT 125	1.00 EA	18.29	18.29	12/29/2016
		8- 1	82466 - OINTMENT; TRIPLE ANTIBIO OINT 1.0 GM 144	1.00 EA	13.61	13.61	12/29/2016
		9- 1	74398 - GLOVES; GLOVES NITRILE EXAM PF XLG MMC	1.00 EA	5.60	5.60	12/29/2016
		10- 1	77982 - CRUTCH TIPS; CRUTCH TIPS LRG LF	1.00 EA	1.63	1.63	12/29/2016
		11- 1	HANDGRIPS; CRUTCH HANDGRIPS CLOSED LF	1.00 EA	1.63	1.63	12/29/2016
		12- 1	CUSHION; CRUTCH UNDERARM CUSHION STD LF	1.00 EA	2.52	2.52	12/29/2016
		13- 1	GLOVES; GLOVES NITRILE EXAM PF MED MMC	2.00 EA	5.60	11.20	12/29/2016

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 Signature	Authorized Signature
	on Total PO
	Amount Page

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.

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001090548

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NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
1008940 HANSEN SHEWMAKERN	04ASPH152 STUSVC	

Supplier: 0000003716
 MOORE MEDICAL CORP.
 PO BOX 4066
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Phone: (800) 234-1464
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Ship To: FOLSOM LAKE COLLEGE
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Tax Exempt? N	Use Tax Applicable: Y	Quantity	UOM	PO Price	Extended Amt	Due Date
Line-Sch	Item/Description					

QUOTE #973784 11/30/16

NOTE TO VENDOR:
 CAMPUS WILL BE CLOSED FOR DELIVERIES FROM DECEMBER 23, 2016 - JANUARY 3, 2017

Sub Total Amount	117.03
Sales Tax Amount	0.00
Total PO Amount	117.03

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	4500	11	FL.VS.HLTH	64400	00000	041A	117.03	2017

0001008940KIRKLINK19-DEC-2016

Verification of this purchase order can be made using the Los Rios Community College District web site listed below. If you have any questions, please contact the Purchasing Office at (916)568-3071.

<http://www.losrios.edu/purchasing/povalidation>

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

A. SPL 12/21/16

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LOS RIOS COMMUNITY COLLEGE DISTRICT

American River College • Cosumnes River College • Folsom Lake College • Sacramento City College

PURCHASE ORDER TERMS AND CONDITIONS

1. **APPLICABLE LAW:** The contract resulting from this order shall be governed by the laws of the State of California
2. **COMPLETION OF ORDERS:** LRCCD reserves the right to withhold payment until order is completed.
3. **DISCOUNTS:** Please show cash payment discount offered on your invoice in connection with any discount offered, time will be computed from date of delivery of the supplies or equipment, or from date correct invoices are received in the office specified by LRCCD if the latter date is later than the date of delivery. Payment is deemed to be made for the purpose of earning discount, on the date payment is mailed or on behalf of LRCCD.
4. **INVOICES:** Invoices shall be prepared and submitted in duplicate unless otherwise specified. Invoices shall contain Purchase order number, date, description of items, sizes and quantities, unit prices, extended totals, place and date of delivery. Invoices or vouchers not on printed bill heads shall be signed by the CONTRACTOR or person furnishing the supplies or services. Every invoice shall be properly itemized. If LRCCD has not received billing for product or services within a one year period LRCCD will not be held responsible for satisfying the debt.
5. **CHANGES:** No change or modification in terms, quantities, or specifications may be made without express authorization in writing from the LRCCD Purchasing Office and signed by the parties hereto, and no oral understanding or agreement not incorporated herein shall be binding on any of the parties hereto. If unit cost of any item exceeds the amount shown by 10% or \$250.00 whichever is less do not ship. Contact LRCCD Purchasing at the phone number provided.
6. **BILL OF LADING:** If Bill of Lading is applicable to this order, send originals to "Ship to" address and duplicate Bill of Lading with invoices to "Bill to" address. All correspondence, invoices, bills of lading, shipping memos, packages, etc., must show purchase order number. If factory shipment, advise factory to comply.
7. **TRANSPORTATION CHARGES:** Invoices for prepaid transportation charges must be supported by original receipted expense bills.
8. **FOB POINT AND FREIGHT CHARGES:** Unless otherwise specified on this order, all items shall be delivered FOB Destination. No charge for delivery, drayage, express, parcel post, packing, cartage, insurance, license fees, permits, or for any other purpose will be paid by LRCCD unless expressly included and itemized in the order. Unless otherwise shown, on "FOB Shipping Point" transactions, CONTRACTOR shall arrange for lowest cost transportation, prepay and add freight to invoice and furnish supporting freight bills if the amount exceeds \$50.00. On "FOB Shipping Point" transactions, should any shipments under this purchase order be received by LRCCD in a damaged condition and any related freight loss and damage claims filed against the carrier or carriers be wholly or partially declined with the inference that damage was the result of the act of the shipper such as inadequate packaging or loading or some inherent defect in the equipment and/or material, CONTRACTOR on request of LRCCD shall at CONTRACTOR's own expense assist LRCCD in establishing carrier liability by supplying evidence that the equipment and/or materials was properly constructed, manufactured, packaged, and secured to withstand normal transportation conditions. Shipments that are California intrastate in nature and where freight is to be borne by LRCCD shall be tendered to carriers with written instructions that rate and charges may not exceed the lowest lawful rates on file with the California Public Utilities Commission.
9. **PATENT INDEMNITY:** The CONTRACTOR shall hold LRCCD, its officers, agents and employees harmless from alleged liability of any nature or kind, including costs and attorney fees and expenses, for infringement or use of any copyrighted or uncopyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.
10. **TAXES:** Certain articles sold to LRCCD are exempt from certain Federal excise taxes. LRCCD will reimburse the CONTRACTOR for, or pay directly, all California State and local sales and use taxes applicable to this purchase.
11. **EQUAL OPPORTUNITY EMPLOYER:** The acceptance of this purchase order by a supplier of goods and services is a certification that such supplier complies with all provisions of executive order 11246 and is an equal opportunity employer.
12. **GENERAL SAFETY ORDERS:** All materials, supplies and services sold to LRCCD shall conform to the general safety orders of the State of California. All materials, except as otherwise specified, must be new and of the best quality of their respective kinds.
13. **INDEMNIFICATION:** CONTRACTOR shall indemnify, defend and hold harmless LRCCD, its trustees, officers, agents, employees and volunteers, from any and all claims, demands, suits, causes of action, damages, penalties, breaches of this agreement, infringement of patent rights, costs, expenses, violations of employee occupational health and safety laws, attorney fees, losses or liability, property damage, personal injuries to or death of persons, arising out of, alleged to have arisen out of, or relating in any way to CONTRACTOR's work to be performed under this agreement, except if caused solely by the negligence of LRCCD.
14. **TERMINATION:** LRCCD may terminate this agreement and be relieved of the payment of any consideration to CONTRACTOR should CONTRACTOR fail to perform the covenants herein contained at the time and in the manner herein provided. In the event of such termination LRCCD may proceed with the work in any manner deemed proper by LRCCD. The cost to LRCCD shall be deducted from any sum due the CONTRACTOR under this agreement and the balance if any, shall be paid the CONTRACTOR upon demand.
15. **ASSIGNMENT:** Without the written consent of LRCCD, this agreement is not assignable by CONTRACTOR either in whole or in part.
16. **PUBLIC WORKS PROJECTS:** CONTRACTOR must comply with Public Contract Code.
17. **CA LABOR CODE:** Pursuant to Section 1700, and following, the CONTRACTOR shall pay not less than the prevailing rate of per diem wages as determined by the Director of the California Department of Industrial Relations. Copies of such prevailing rate of per diem wages are on file at the Business Office of the Los Rios Community College District, 1919 Spanos Court, Sacramento, CA 95825. Those copies shall be made available to any interested party upon request. The CONTRACTOR shall forfeit, as penalty to the LRCCD, Fifty Dollars (\$50.00) for each calendar day or portion thereof, for each workman paid less than the stipulated prevailing rates for any work done under the contract by him/her or by any subcontractor under him, in violation of the provisions of such Labor Code.
18. **NOTICE:** Your employees may be exposed to hazardous substances during the course of their work while on LRCCD property. For additional information on the hazardous substances that your employees may be exposed to contact the LRCCD General Services Department at (916) 568-3048.
19. **INSURANCE:** CONTRACTOR shall, at all times, maintain in full force and effect the following insurance: Workers' Compensation, Commercial General Liability, Auto Liability, and Professional Liability if licensed professional. Policy limits for each shall be at least \$1,000,000 AND \$3,000,000 AGGREGATE for bodily injury, personal injury and property damage. Any combination of General Liability and Excess Coverage can be combined to meet the Aggregate. LRCCD shall be named as an additional insured on CONTRACTOR's policies. The CONTRACTOR shall provide a certificate of insurance and required endorsements to comply with this section at least 15 days prior to commencement of work under this contract. The certificate shall state that LRCCD will be given 30 days notice of any material change or cancellation in coverage.
20. **DISQUALIFIED EMPLOYEES:** CONTRACTOR shall ensure that persons who perform services on LRCCD property have not been convicted of any felony, or any controlled substance offense or any sex offense as those terms are defined by Education Code section 87008-87010. If LRCCD determines that any person employed by CONTRACTOR to work on LRCCD property is incompetent, unfaithful, intemperate, disorderly, abusive or is otherwise unsatisfactory, CONTRACTOR shall cause that employee to be removed from working on LRCCD property immediately, and that person shall not be employed again on LRCCD property.
21. **WORK AUTHORIZATION:** Prior to LRCCD's acceptance of this Agreement, CONTRACTORS who are not U.S. citizens must provide verification of (a) work authorization status from the appropriate U.S. Department of State; (b) a copy of their U.S. visa; (c) the number of days present in the U.S.; and (d) tax treaty status. LRCCD shall not make any payments to CONTRACTOR unless CONTRACTOR holds the appropriate U.S. visa. CONTRACTOR is responsible for ensuring they are in possession of the appropriate visa.
22. **WARRANTY:** CONTRACTOR expressly warrants that all materials, goods, equipment, services, and/or labor shall conform to the requirements set forth or incorporated into this order and any applicable industry standards or requirements, shall be merchantable and free from defects in workmanship, materials and/or design (including latent defects), and shall perform as specified. CONTRACTOR further warrants that all materials, goods, equipment, services, and/or labor will be fit and sufficient for the particular purposes intended by LRCCD. Unless agreed upon otherwise between LRCCD and CONTRACTOR, the warranty period shall be the longer of: (a) any express warranty included in this service agreement; (b) one year after the materials, goods, equipment, services, and/or labor are accepted by LRCCD; or (c) any warranty period provided under any applicable California law.

Requisition

Supplier: MOORE MEDICAL CORP. 0000003716
 PO BOX 4066
 FARMINGTON CT 06032-4066
 United States

Phone: (800) 234-1464 **Fax:** (800) 944-6667
email:

Ship To: RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630-6798

Business Unit: GENFD OPEN		Page
Req ID: 0001008940	Date: 12/16/2016	1
Requisition Name: MOORE MEDICAL		
Requester: Mary Hansen	Bldg#: STUSVC	
Requester Signature		
Buyer: Nicholas Shewmaker		
Approved:		
Entered By: Valerie 16-DEC-2016		

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	WIPES; SUPER SANI-CLOTH LOARGE ORM	2	EA	5.95	11.90	
2-1	MEDICINE; MEDI-FIRST IBUPROF 200MG 250X2	1	EA	13.82	13.82	
3-1	FEMININE PADS; KOTEX REG MAXI PADS	2	EA	3.69	7.38	
4-1	DISPENSER; GLOVE DISPENSER 3 BOX	1	EA	16.95	16.95	
5-1	ALCOHOL PADS; ALCOHOL PREP PADS MMC STER/200	2	EA	1.62	3.24	
6-1	BAND-AIDS; BAND-AID FLEXIBLE #4444 1X3	2	EA	4.63	9.26	
7-1	KLEENEX; KLEENEX FACIAL TISSUES WHT 125	1	EA	18.29	18.29	
8-1	OINTMENT; TRIPLE ANTIBIO OINT 1.0 GM 144	1	EA	13.61	13.61	
9-1	GLOVES; GLOVES NITRILE EXAM PF XLG MMC	1	EA	5.60	5.60	
10-1	CRUTCH TIPS; CRUTCH TIPS LRG LF	1	EA	1.63	1.63	
11-1	HANDGRIPS; CRUTCH HANDGRIPS CLOSED LF	1	EA	1.63	1.63	
13-1	CUSHION; CRUTCH UNDERARM CUSHION STD LF	1	EA	2.52	2.52	
16-1	GLOVES; GLOVES NITRILE EXAM PF MED MMC	2	EA	5.60	11.20	

Total Requisition Amount: 117.03

TAX = \$9.36
 TOTAL = \$126.39

<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	4500	11	FL.VS.HLTH	60100	00000	041A	117.03

604400
 jmi

Approval Signature 	Approval Signature	Approval Signature
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1690 New Britain Ave. | Farmington, CT 06032 | Phone: 800.234.1464

Customer Number - 45092246

Folsom Lake College

10 College Pkwy
Receiving
FOLSOM, CA 95630

Attention: Mary F Hansen












PO No.

RFQ No.

Quotation No. 973784

Eff. Date 11/30/2016

Sales Rep Tom Krebs Field

Item #	Image	Description	Country	Size	Package	U/M	Qty	Unit Price*	Extended Price
<u>81831</u>		Super Sani-Cloth Large ORM	USA	6" x 6.75" (Can/160)	Can/160	EA	2	\$ 5.95	\$ 11.90
<u>64097</u>		Medi-First Ibuprofen 200mg 250x2	USA, China, India		250 Pkg/2	EA	1	\$ 13.82	\$ 13.82
<u>26292</u>		Kotex U Regular Maxi Pads	Unknown		Pkg/24	EA	2	\$ 3.69	\$ 7.38
<u>77693</u>		Glove Dispenser 3 Box	USA	3 Box Holder	Each	EA	1	\$ 16.95	\$ 16.95
<u>98721</u>		Alcohol Prep Pads MMC Ster/200	Unknown		Box/200	EA	2	\$ 1.62	\$ 3.24
<u>13389</u>		Band-Aid Flexible #4444 1x3	Unknown	1" x 3"	Box/100	EA	2	\$ 4.63	\$ 9.26
<u>57706</u>		Kleenex Facial Tissues Wht 125	Unknown	(Case includes 12 boxes of 125)	Case/12	CS	1	\$ 18.29	\$ 18.29
<u>82466</u>		Triple Antibio Oint 1.0gm 144	USA	1.0gm	Box/144	EA	1	\$ 13.61	\$ 13.61
<u>74398</u>		Gloves Nitrile Exam PF Xlg MMC	Unknown	X-Large	Box/100	EA	1	\$ 5.60	\$ 5.60
<u>74396</u>		Gloves Nitrile Exam PF Med MMC	Unknown	Medium	Box/100	EA	2	\$ 5.60	\$ 11.20
<u>77982</u>		Crutch Tips Lrg LF	Unknown		Pair	EA	1	\$ 1.63	\$ 1.63

1690 New Britain Ave. | Farmington, CT 06032 | Phone: 800.234.1464

Item #	Image	Description	Country	Size	Package	U/M	Qty	Unit Price*	Extended Price
77984		Crutch Handgrips Closed LF	Unknown		Pair	EA	1	\$ 1.63	\$ 1.63
77983		Crutch Underarm Cushion Std LF	Unknown		Pair	EA	1	\$ 2.52	\$ 2.52
								Total	\$ 117.03

Comments:

Terms and Conditions:

* Prices Subject to Change

See our full Terms & Conditions at: www.mooremedical.com/terms