

# 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 B117465**

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

<b>Date</b>	<b>Revision</b>	<b>Page</b>
07/14/2016		1
<b>Payment Terms</b>	<b>Freight Terms</b>	<b>Ship Via</b>
NET 30	Shipping Point	Best Metho
<b>Reference:</b>		<b>Location / Dept</b>
1008189 HANEYB SHEWMAKERN		04ADMN ADMIN

**Supplier:** 0000024305  
 US BANK  
 CORPORATE PAYMENT SYSTEM  
 PO BOX 790428  
 ST LOUIS MO 63179-0428

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

**email:**

**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	041X BSOF BLANKET PURCHASE ORDER FOR FOLSOM LAKE COLLEGE CAL CARD PURCHASES, CARD ISSUED TO JOAN HARMAN, FLC BSO GF FROM 7/1/16 - 6/30/17	1.00	LOT	15,000.00	15,000.00	05/01/2017
2- 1	051C PISO BLANKET PURCHASE ORDER FOR FOLSOM LAKE COLLEGE CAL CARD PURCHASES, CARD ISSUED TO JOAN HARMAN, FLC BSO GF FROM 7/1/16 - 6/30/17	1.00	LOT	3,000.00	3,000.00	05/01/2017

AUTHORIZED PERSONNEL:  
 JOAN HARMAN

FY 16 BPO B116344

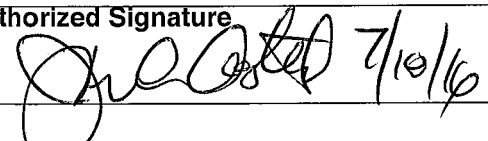
<b>Sub Total Amount</b>	18,000.00
<b>Sales Tax Amount</b>	0.00
<b>Total PO Amount</b>	18,000.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5890	11	FL.CP.PISO	67100	00000	051C	3,000.00	2017
GENFD	5890	11	FL.VA.BSOF	67700	00000	041X	15,000.00	2017

0001008189KIRKLINK08-JUL-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



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

**Supplier:** US BANK  
CORPORATE PAYMENT SYSTEM  
PO BOX 790428  
ST LOUIS MO 63179-0428  
United States

0000024305

<b>Business Unit:</b> GENFD		<b>OPEN</b>
Req ID:	Date	Page
0001008189	07/01/2016	1
Requisition Name: 2017 US BANK CAL-CARD GENFD		
Requester	Bldg#	
Brenda Haney	ADMIN	
Requester Signature		
Buyer: Nicholas Shewmaker		
Approved:		

**email:**

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

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	041X BSOF BLANKET PURCHASE ORDER FOR FOLSOM LAKE COLLEGE CAL CARD PURCHASES, CARD ISSUED TO JOAN HARMAN, FLC BSO GF FROM 7/1/16 - 6/30/17	1	LOT	15,000.00	15,000.00	07/01/2016
2-1	051C PISO BLANKET PURCHASE ORDER FOR FOLSOM LAKE COLLEGE CAL CARD PURCHASES, CARD ISSUED TO JOAN HARMAN, FLC BSO GF FROM 7/1/16 - 6/30/17	1	LOT	3,000.00	3,000.00	07/01/2016

Total Requisition Amount:                      18,000.00

AUTHORIZED PERSONNEL:  
JOAN HARMAN

NOTE TO PURCHASING:  
ASSIGN B117\_\_\_PO#  
NO TAX  
AMOUNT ONLY

PY BPO B116344

<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	5890	11	FL.CP.PISO	67100	00000	051C	3,000.00
GENFD	5890	11	FL.VA.BSOF	67700	00000	041X	15,000.00

Approval Signature	Approval Signature <i>Kathleen Kublan</i>	Approval Signature 6/22/16
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**BLANKET ORDER RELEASE FORM**

ARC	<input type="checkbox"/>	DO	<input type="checkbox"/>
CRC	<input type="checkbox"/>	FM	<input type="checkbox"/>
FLC	<input checked="" type="checkbox"/>	ETW	<input type="checkbox"/>
SCC	<input type="checkbox"/>	OTHER	_____

Release No. <b>FL17007</b>	Purchase Order No. <b>B117465</b>
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**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

see below

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
LINE #1 - 5/30/17 - PAYPAL *PAWSLIFEFOU 402-935-7733 CA	1		30.00	\$ 30.00
CHARGE TO GENFD 5200 11 FL.VA.STAF 67500 00000 047C				0.00
				0.00
LINE #2 - FACEBK - ID 1090566594391874-2582586	1		78.11	78.11
LINE #2 - FACEBK - ID 1090566614391872-2582587	1		34.61	34.61
LINE #2 - VOC*ICONTACTEMAIL MKT INVOICE 6662352	1		25.60	25.60
LINE #2 - FACEBK - ID 1372453516203175-2595589	1		222.47	222.47
LINE #2 - FACEBK - ID 1372453519536508-2595590	1		28.38	28.38
LINE #2 - VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD	1		13.86	13.86
				0.00
LINE #2 - SLICKPLAN.COM DAYTON OH	1		9.99	9.99
				0.00
<b>Purchases Charged to Categorical Programs, Grants or Special Projects</b> This purchase is in compliance with the requirements of _____			<b>Total Amount or Estimate</b>	<b>\$ 443.02</b>
Program Director/Coordinator Signature N/A		Program Name For grants/special projects		
Program Goal/Objective Number/Explanation		Program/Grant Number		

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.

*Paula Dabe* 7/16/17  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

*Janet Herman* 7/18/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

<b>1</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VA.BSOF</b>
PO Line #	Bus. Unit	Account	Fund	Org
<b>67700</b>	<b>00000</b>	<b>2017</b>	<b>041X</b>	<b>\$ 30.00</b>
Program	Sub-Class	BY	Proj/Grant	Amount
<b>2</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VP.PISO</b>
PO Line #	Bus. Unit	Account	Fund	Org
<b>67100</b>	<b>00000</b>	<b>2017</b>	<b>051C</b>	<b>\$ 413.02</b>
Program	Sub-Class	BY	Proj/Grant	Amount

**\$ 443.02**









Company Name: FOLSOM LAKE - GF
Corporate Account Number: XXXX-XXXX-XXXX-3768
Statement Date: 06-22-2017

**NEW ACTIVITY**

Post	Tran	Date	Date		
06-06	06-05	242042971566	37957421545	FACEBK FVR2EDSCN2 650-5434800 CA	222.47
06-06	06-05	2420429715663797398124	1	FACEBK GVR2EDSCN2 650-5434800 CA	28.38
06-06	06-05	24906417156040350249065		VOC*ICONACTEMAIL MKT SVC 877-9683996 MD	13.86
06-21	06-20	24013397	171003280081987	SLICKPLAN.COM DAYTON OH	9.99

Department: 00000 Total: \$443.02  
 Division: 00000 Total: \$443.02





U.S.BANCORP SERVICE CENTER  
 P. O. Box 6343  
 Fargo, ND 58125-6343

DISTRICT OFFICE

ACCOUNT NUMBER XXX-XXXX-XXX-0269  
 STATEMENT DATE 06-22-17  
 TOTAL ACTIVITY \$443.02

⑆00002146 01 SP 0.500 106481088795473 P

XXXXX XXXXXX

FLC BSO GF  
 10 COLLEGE PKWY  
 FOLSOM CA 95 63 0 - 6798

"MEMO STATEMENT ONLY"  
 DO NOT REMIT PAYMENT

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder \_\_\_\_\_ Date \_\_\_\_\_ Approver \_\_\_\_\_ Date \_\_\_\_\_

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
05-31	05-30	PAYPAL *PAWSLIFEFOU 402-935-7733 CA PUR ID:86729815 TAX: 0.00	24492157 150894867298157	8398	30.00
06-01	05-31	FACEBK ATZDVAADN2 650-5434800 CA PUR ID:ATZDVAADN2 TAX: 0.00	24204297 151660732811546	7311	78.11
06-01	05-31	FACEBK GTZDVAADN2 650-5434800 CA PUR ID:GTZDVAADN2 TAX: 0.00	24204297 151660737991244	7311	34.61
06-02	06-01	VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BLOTEA46EF8B TAX: 0.00	24906417 152040156814272	5968	25.60
06-06	06-05	FACEBK FVR2EDSCN2 650-5434800 CA PUR ID: FVR2EDSCN2 TAX: 0.00	24204297 156637957421545	7311	222.47
06-06	06-05	FACEBK GVR2EDSCN2 650-5434800 CA PUR ID: GVR2EDSCN2 TAX: 0.00	24204297156637973981241	7311	28.38
06-06	06-05	VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BTOTFA8B5158 TAX:0.00	24906417 156040350249065	5968	13.86
06-21	06-20	SLICKPLAN.COM DAYTON OH PUR ID: 1 TAX: 0.00	24013397 171003280081987	7372	9.99

Default Accounting Code:		
CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER XXX-XXXX-XXX-0269	ACCOUNT SUMMARY PREVIOUS BALANCE 0.00 PURCHASES & OTHER CHARGES \$443.02
	STATEMENT DATE DISPUTED AMOUNT 06-22-17 \$.00	
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT	CASH ADVANCES \$0.00 CASH ADVANCE FEE \$0.00 CREDITS \$0.00
		TOTALACTIVITY \$443.02

# Paws of Life Foundation

You created a PayPal account and  
paid **\$30.00 USD**

to Paws of Life Foundation  
Details

Get your PayPal receipts in Messenger

**Paid with**

Visa x-0269

\$30.00 USD

This transaction will appear on your statement as PYPAL \*PAWSLIFEFOU

**Purchase details**

Receipt number: 1051090430348398

We'll send confirmation to:

sabop@flc.losrios.edu

**Merchant details**

Paws of Life Foundation  
robin@pawsoflife.org

**CALCard**

Order #: \_\_\_\_\_

Last #: 0269

Order Date: 5/30/17

# 1051-0904-3034-8398

[Return to Merchant](#)



# LOS RIOS COMMUNITY COLLEGE DISTRICT TRAVEL AUTHORIZATION AND REIMBURSEMENT CLAIM

(Note: Read instructions on back of set before completing)

Please check box where payment is to be sent:

- ARC  FLC  D.O.  EWC  
 CRC  SCC  FM

T-115570

Employee Name Theresa Wandrich ID # 6752260

Conference Sponsor Power of Life  
Name of Organization

Conference/Activity Delano Class Crime Scene Presentation Destination Delano

Budget No. 1: 67500 / 0000 / 0490  
BusUnit Acct Fund Org Pgm Code SubClass Proj/Grant

Budget No. 2: 67500  
BusUnit Acct Fund Org Pgm Code SubClass Proj/Grant

### PART I - Request to Attend

### PART III - Request for Reimbursement

Inclusive dates of travel:

From 6-20-17 / 8AM to 6-20-17 / 11AM  
Date Time Date Time

Estimated Expenses: \*Indicates Receipt Required for Reimbursement

A. Transportation (Estimate cost of air fare) \$ 30.00  
 Air\*  Dist. Vehicle  Priv. Vehicle X miles c/mile

Travel Agency (Air fare)

The undersigned certifies that the vehicle he/she uses for Los Rios Community College District business carries the legal minimum insurance required by law.

B. Lodging\* \$ \_\_\_\_\_  
Name of Hotel/Motel \_\_\_\_\_  
\_\_\_\_\_ days @ \$ \_\_\_\_\_ day

C. Registration/Conference Fee\* (check one) \$ 30.00  
 incl. certain meal(s)  excl. meal(s)

D. Meals..... \$ \_\_\_\_\_  
Breakfast \$ \_\_\_\_\_ x \_\_\_\_\_ Lunch \$ \_\_\_\_\_ x \_\_\_\_\_ Dinner \$ \_\_\_\_\_ x \_\_\_\_\_  
# of days # of days # of days

E. Other (describe)\* \$ \_\_\_\_\_  
(Admin. Approval required for vehicle rental)

F. Incidental Expenses \$ 30.00

Total Estimated Expenses \$ 30.00  
Maximum Allowance, if applicable \$ \_\_\_\_\_

Travel charged to Categorical Programs, Grants or Special Projects:  
This travel is in compliance with the requirements of:

Program Name \_\_\_\_\_ Program Director/Coordinator Signature \_\_\_\_\_  
For grants/special projects: \_\_\_\_\_ Project/Grant Number \_\_\_\_\_  
Program Goal/Objective Number/Explanation \_\_\_\_\_

Approval [Signature] Date 5/10/17  
Area Dean/Supervisor  
Approval [Signature] Date 5/15/17  
Vice President, Administration  
Approval \_\_\_\_\_ Date \_\_\_\_\_  
President/Designee/or Chancellor

### PART II - Request for Cash Advance/Prepaid Expense

(To be completed by Requestor)

A. Employee Cash Advance GENFD / 9161 / 11 \$ \_\_\_\_\_  
BusUnit Acct Fund

B. Registration (Payee) \$ \_\_\_\_\_  
Registration Due Date \_\_\_\_\_  
Vendor I.D. \_\_\_\_\_

Budget No. 1: \$ \_\_\_\_\_ Amount Budget No. 2: \$ \_\_\_\_\_ Amount

Approval \_\_\_\_\_  
Vice President, Administration

To be completed no later than 3 days after return from authorized travel.

\* Indicates original receipts required - enter all claimable costs incurred, including prepaid amounts.

From 6-20-17 8AM To 6-20-17 11AM  
Date Time Date Time

A. Transportation \$ \_\_\_\_\_  
 Air fare\*  Bus\*  Other\*  
 Prepaid to travel agency by district  
 Private Vehicle X miles c/mile \$ \_\_\_\_\_

B. Lodging\* \$ \_\_\_\_\_  
(Single occupancy rate only/exclude phone calls & other costs)

C. Registration Fee (check one) \$ 30.00  
(Enter full cost even if prepaid)  
 Prepaid by DO/College  No Prepayment  
(No receipt required if prepaid)

D. Meals (Enter actual expenses not to exceed meal allowance stated per Regulation 8341.)

Date	Breakfast	Lunch	Dinner	Total

Total Meals \$ \_\_\_\_\_

E. Other Expenses\* \$ 30.00  
(Parking fees, bridge toll, business phone call, Wi-Fi, and other business related expenses)  
Online class  
(Admin. approval required for vehicle rental)

F. Incidental Expenses - not to exceed \$5/day \$ \_\_\_\_\_  
(Tips, personal phone call, and other misc. travel expenses)

G. Total Expenses (A - F) \$ \_\_\_\_\_

Total Expenses (lesser of Max. Allowance or Total Expenses) \$ 30.00  
Less Amount(s) Prepaid \$ < 30.00 >  
Subtotal \$ \_\_\_\_\_  
Less Cash Advance (Part II) \$ \_\_\_\_\_  
Total Requested for Reimbursement \$ 30.00

### Certification/Approval

I certify that the above claim is an accurate accounting of expenses incurred which does not exceed the allowances provided per Regulation 8341, and complies with District insurance requirements.

unavailable to sign 6-28-17  
Date

Approved [Signature] 6-28-17  
Area Dean/Supervisor Date

Approved \_\_\_\_\_  
Vice President, Administration Date

### PART IV Vendor I.D.

Enter allocation of Subtotal (PART III.G.) above

Budget No. 1: \$ \_\_\_\_\_ Amount Budget No. 2: \$ \_\_\_\_\_ Amount

D.O. Use: GENFD / 9161 / 11 \$ \_\_\_\_\_  
BusUnit Acct Fund Amount



**From:** service@paypal.com  
**Sent:** Tuesday, May 30, 2017 1:54 PM  
**To:** Sabo, Paula  
**Subject:** Your payment to Paws of Life Foundation



You sent a payment of \$30.00 USD to Paws of Life Foundation.

May 30, 2017 13:54:03 PDT  
Receipt No: 1051-0904-3034-8398

Hello Joany Harman,

This charge will appear on your credit card statement as payment to PAYPAL \*PAWSLIFEFOU.

**Save time with a PayPal account**

Create a PayPal account and save your payment information. You won't need to enter your payment information every time you shop online.

[Sign Up Now](#)

**Shop with confidence**

We keep your financial information secure.

**Transactions monitored 24/7**

Our fraud specialists help protect your account.

**You're protected**

Zero fraud liability for eligible unauthorized purchases. [See eligibility](#)

**Merchant information:**

Paws of Life Foundation  
robin@pawsoflife.org  
<http://www.pawsoflife.org>  
5152331186

**Instructions to merchant:**

None provided

**Shipping information:**

**Shipping method:**

Not specified

Description	Unit price	Qty	Amount
Crime Scene Preservation and Search Incident Considerations for the Professional Volunteer Item #: Crime Scene Preservation User: Theresa Hendricks	\$30.00 USD	1	\$30.00 USD

Discount: -\$0.00 USD  
Total: \$30.00 USD

**Receipt No: 1051-0904-3034-8398**

Please keep this receipt number for future reference. You'll need it if you contact customer service at Paws of Life Foundation or PayPal.

[Help](#) | [Security Center](#)

**RIGHT TO REFUND**

You, the customer, are entitled to a refund of the money to be transmitted as a result of



this agreement if PayPal does not forward the money received from you within 10 days of the date of its receipt, or does not give instructions committing an equivalent amount of money to the person designated by you within 10 days of the date of the receipt of the funds from you unless otherwise instructed by you.

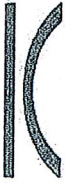
If your instructions as to when the money shall be forwarded or transmitted are not complied with and the money has not yet been forwarded or transmitted, you have a right to a refund of your money.

If you want a refund, you must mail or deliver your written request to PayPal at P.O. Box 45950, Omaha, NE 68145-0950. If you do not receive your refund, you may be entitled to your money back plus a penalty of up to \$1000 and attorney's fees pursuant to Section 2102 of the California Financial Code.

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PayPal Email ID PP1469 - a3ad05edaaa86



**Classified Professional Development Proposal Form**

- Proposals must be submitted at least 15 working days prior to the proposed activity/event.
- Complete Parts A and B of this form. Attach copies of all support materials (i.e., Travel Authorization Form (TA), event invitation, registration information, itinerary, itemized list of all costs, etc.).
- Submit the completed proposal form and supporting documents to the Classified Professional Development Committee (CPDC). The funding sub-committee(s) will notify applicant within 15 working days of the committee's recommendation/approval.
- Forward the completed original TA to the Business Service Office for further approval.
- It is the applicant's responsibility to make all personal travel arrangements (i.e., registration fee, lodging, airfare, vehicle rentals, etc.) Time permitting; the Business Services Office can assist in making flight reservations and/or payment of registration fees.
- Within 15 working days of completion of the activity/event submit Part C of this form to the CPDC.

Please contact the Classified Staff Development Committee if you have question,  
flc-ClassifiedPDC@flc.losrios.edu, or go to the CPDC Insider page for more information.

**Part A**

Name: Theresa Hendricks

Department: Physical Science

Date Submitted: 5/9/2017 TA# n/a

Name of event/activity: Online class  
class: Crime Science preservation and search incident considerations for the professional/volunteer

Destination/location: anytime

Date(s) of the event/activity: From: anytime To: 5/9/17

Applicant Signature: [Signature] Date: 5/9/17

Manager/Supervisor: [Signature] Date: \_\_\_\_\_

Manager/Supervisor, check if this event/activity is not a requirement of the applicants job duties.

**Funds Requested:**

\$ \$30.00 Classified Professional Development

\$ \_\_\_\_\_ Department

\$ \_\_\_\_\_ Los Rios Classified Employees Association (LRCEA)

\$ \_\_\_\_\_ Other (Specify: \_\_\_\_\_)

\$ \_\_\_\_\_ Your Total Expenses for this activity/event.

Will additional FLC employees be attending?  
 Yes  No  Unknown

Please provide the amount of funding you have already received for the current fiscal year:

\$ 0 CPDC (annual \$500 limit)

\$ 0 LRCEA (annual \$500 limit)

\$ 0 LRSA (Los Rios Supervisors Association)

**CPDC USE ONLY**

Proposal #: \_\_\_\_\_ Date Received \_\_\_\_\_ Subcommittee Recommendation  Yes  No

Authorized by (CPDC Chair) \_\_\_\_\_ Date \_\_\_\_\_ Authorized by (LRCEA PDC Chair) \_\_\_\_\_ Date \_\_\_\_\_



Name: **Theresa Hendricks**

Event/Activity: \_\_\_\_\_

Dates: \_\_\_\_\_

TA#: \_\_\_\_\_

**Part B**

Required for funding approval.

**Part C**

To be completed and returned to the CPDC within 15 working days of completion of the event/activity.

Describe the planned event/activity (What, Where, How, etc.)  
Online class

Describe your experience at this event/activity.

How will this event/activity enhance your professional growth?  
This class will further my knowledge regarding Search and Rescue and how to preserve incident scenes that may occur on campus. This class does meet the crime scene preservation prerequisite for the National Association of Search and Rescue.

Did this event/activity meet your expectations for professional growth? Please explain.

How will this event/activity benefit the college community?  
It is my hope that with this knowledge we can do more training for our ACES and CCERT teams. A function of CCERT is SAR after an incident or to assist in locating a device on campus. Having our teams trained regarding preserving the scene will help LRPD by not complicating their job or having evidence lost, destroyed or compromised.

Did this event/activity meet your expectations for benefit to the college community? Please explain.

- Individual Proposal.
  - Multiple attendees/Group proposal.
- List attendees/group:

Would you recommend this activity/event to others? Why?

Parts A, B, and C have been completed,

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## CONSIDERATIONS FOR THE PROFESSIONAL VOLUNTEER

### 21 APR Crime Scene Preservation and Search Incident Considerations for the Professional Volunteer

BY COLSIN FRESTER, THE HAWAIIAN FIRE INCIDENT ACADEMY CLASSES

#### Description:

This class offers an overview of crime scene preservation for the professional search and rescue volunteer. Scene preservation, types of evidence, chain of custody, proper procedures to follow, training logs and post search incident reports are covered.

This class does meet the crime scene preservation pre-req for the National Association of Search and Rescue.

#### Module Developers:

Colsin Frester, The Hawaiian

#### Type:

Online Independent Study

#### Cost:

\$30.00

For full access to courses you'll need to take a minute to create a new account for yourself on the courses page. Please follow the directions on the right side of the page.

[Register Here](#)

[← Previous](#)

[Next →](#)

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3115 Jefferson Ave  
Tampa, FL 33605  
813.288.1111  
www.catepress.com



Shop for working dog gear or dog lover gear



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INTEROFFICE MEMORANDUM

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Date: May 12, 2017  
To: Theresa Hendricks  
From: Wenda Vander Werf, Campus Professional Development Classified Co-Chair  
Subject: Approval, Crime Scene Preservation and Search Incident online class

Congratulations! Your request for Professional Development funding has been approved by the Professional Development Committee!

Amount: \$30.00  
Event: Crime Scene Preservation and Search Incident Considerations  
Location: Online/independent study class  
Date: begin before June 30, 2017

Please use the following budget code for your travel authorization:

GENFD 5200 11 FL.VA.STAF 67500 00000 2017 047C

Following the Individual/Group Proposal Instructions, it is your responsibility to make all personal travel arrangements.

A brief report about the activity is due two weeks after your workshop. Please submit the report for the Professional Development Committee to my attention. Include an evaluation of the event, as well as what you personally gained by attending.

Please contact the Business Office at your campus *in advance* should you need to substitute staff attending the event or cancel for any reason. Be aware, many conferences/workshops do not allow refunds or substitutions if less than 30 from the date of the event.

If you have any questions, I am available to assist by phone at 916.608.6733 or by email at [vanderw@flc.losrios.edu](mailto:vanderw@flc.losrios.edu)

Enjoy your event!

cc: Kathleen Kirklin

Receipt for Folsom Lake College

Account ID: 4105408242920



Payment Date  
May 31, 2017 11:21am

Payment Method  
VISA \*0269  
Reference Number: ATZDVAADN2

Paid

\$78.11

Transaction ID  
1090566594391874-2582586

Remaining ad costs at the end of the month.

Product Type  
Facebook

Campaigns

<b>Post: "Today, Thurs., May 4, you can participate in a..."</b>		
From May 4, 2017 4:30am to May 30, 2017 12:00am		<b>\$10.00</b>
-----		
Post: "Today, Thurs., May 4, you can participate in a..."	450 Impressions	\$10.00
<b>Post: "Congrats to the Falcon's Eye Theatre on their..."</b>		
From May 4, 2017 4:30am to May 30, 2017 12:00am		<b>\$19.97</b>
-----		
Post: "Congrats to the Falcon's Eye Theatre on their..."	1,567 Impressions	\$19.97
<b>Post: "Tune in to our live video stream of tonight's..."</b>		
From May 4, 2017 4:30am to May 30, 2017 12:00am		<b>\$7.36</b>
-----		
Post: "Tune in to our live video stream of tonight's..."	877 Impressions	\$7.36
<b>Post: "Congratulations to our Class of 2017! For those..."</b>		
From May 4, 2017 4:30am to May 30, 2017 12:00am		<b>\$15.00</b>
-----		
Post: "Congratulations to our Class of 2017! For those..."	1,010 Impressions	\$15.00
<b>Did You Know? (U17 campaign)</b>		
From May 4, 2017 4:30am to May 30, 2017 12:00am		<b>\$25.78</b>
-----		
DYK 2017 Grad	7,119 Impressions	\$20.93
DYK Womens Soccer	1,668 Impressions	\$4.85

Receipt for Folsom Lake College

Account ID: 4105408242920



Payment Date  
May 31, 2017 11:21am

Payment Method  
VISA \*0269  
Reference Number: GTZDVAADN2

Transaction ID  
1090566614391872-2582587

Product Type  
Instagram

Paid

**\$34.61**

Remaining ad costs at the end of the month.

---

**Campaigns**

---

<b>Did You Know? (U17 campaign)</b>		
From May 24, 2017 11:30am to May 30, 2017 12:00am		<b>\$34.61</b>
<hr/>		
DYK 2017 Grad	11,943 Impressions	\$29.07
DYK Womens Soccer	2,033 Impressions	\$5.54

---



# icontact"

Please make your payment to:

iContact LLC  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 06/01/2017

Due by: 06/01/2017

Bill to: XXXXXX XXXXX  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6662352	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Joany Harman	iContact Monthly Subscription (Jun 1, 2017 - Jun 30, 2017) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Joany Harman	\$25.60 Payment via Visa xxxxxxxxxxxx0269, Authorization# 007284		\$25.60
		<b>Total Due:</b>	<b>\$0.00</b>

This invoice was paid on 06/01/17. Thank you for your payment!

Thank you for being our client!  
iContact

Receipt for Folsom Lake College

Account ID: 4105408242920



Payment Date  
Jun 5, 2017 10:43am

Payment Method  
VISA \*0269  
Reference Number: FVR2EDSCN2

Transaction ID  
1372453516203175-2595589

Product Type  
Facebook

Paid

**\$222.47**

You made this manual payment.

**Campaigns**

<b>Did You Know? (U17 campaign)</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$11.45</b>
-----		
DYK Womens Soccer	1,228 Impressions	\$3.25
DYK MLT	3,214 Impressions	\$6.79
DYK Falcons Eye	722 Impressions	\$1.41
<b>Summer Reg. Push</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$149.67</b>
-----		
Faceted	637 Link Clicks	\$149.67
<b>Post: "Get ahead this summer! Register for summer..."</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$46.27</b>
-----		
Post: "Get ahead this summer! Register for summer..."	8,267 Impressions	\$46.27
<b>Post: "So proud of FLC alum and our 2017 Commencement..."</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$0.06</b>
-----		
Post: "So proud of FLC alum and our 2017 Commencement..."	2 Impressions	\$0.06
<b>Post: "Get some of your General Ed out of the way this..."</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$9.84</b>
-----		
Post: "Get some of your General Ed out of the way this..."	2,403 Impressions	\$9.84
<b>Post: "Learn about the people and world-changing events..."</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$0.96</b>
-----		
Post: "Learn about the people and world-changing events..."	270 Impressions	\$0.96
<b>Post: "The summer session starts this week but there is..."</b>		
From May 29, 2017 7:00pm to Jun 5, 2017 10:30am		<b>\$4.22</b>
-----		
Post: "The summer session starts this week but there is..."	998 Impressions	\$4.22



Receipt for Folsom Lake College

Account ID: 4105408242920



Payment Date  
Jun 5, 2017 10:43am

Payment Method  
VISA \*0269  
Reference Number: GVR2EDSCN2

Paid

**\$28.38**

Transaction ID  
1372453519536508-2595590

You made this manual payment.

Product Type  
Instagram

Campaigns

Did You Know? (U17 campaign)		
From May 30, 2017 12:00am to Jun 5, 2017 10:30am		<b>\$24.49</b>
DYK Womens Soccer	2,392 Impressions	\$6.36
DYK MLT	4,650 Impressions	\$13.21
DYK Falcons Eye	3,083 Impressions	\$4.92
Post: "Get ahead this summer! Register for summer..."		
From May 30, 2017 12:00am to Jun 5, 2017 10:30am		<b>\$3.73</b>
Post: "Get ahead this summer! Register for summer..."	531 Impressions	\$3.73
Post: "Get some of your General Ed out of the way this..."		
From May 30, 2017 12:00am to Jun 5, 2017 10:30am		<b>\$0.16</b>
Post: "Get some of your General Ed out of the way this..."	17 Impressions	\$0.16



# Receipt

**Billed To:**  
folsomlakecollege  
Joany Harman  
[batfern@flc.losrios.edu](mailto:batfern@flc.losrios.edu)

**Invoice ID:** 40154505917  
**Payment Date:** June 20, 2017  
**Payment Method:** Credit Card ending in 0269  
**Account:** [folsomlakecollege.slickplan.com](https://folsomlakecollege.slickplan.com)

Service	Price (USD)
Slickplan Basic Plan (folsomlakecollege.slickplan.com) Monthly Subscription	\$9.99
	<b>Amount Paid:</b> \$9.99
	<b>Amount Due:</b> \$0.00

Update your billing information in [Account Settings](#)  
Questions? [Contact Slickplan Support](#) or use our [Help Center](#)  
© 2017 Slickplan · 104 Brown Street, Dayton, Ohio 45402

**New!** Earn cash by telling your friends about Slickplan! Become an affiliate. [Learn more](#)





LOS RIOS COMMUNITY COLLEGE DISTRICT

1919 Spanos Court • Sacramento, CA 95825-3981

P.O. No. F 3355

Date 6/14/17

2017

LIMITED PURCHASE ORDER

(Not to Exceed \$200.00)

VENDOR NAME AND ADDRESS: <u>Slickplan.com</u>	DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call  <u>* see Kristy Hart to add credit card info to Slickplan site</u>
--	--

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	<u>Monthly fee (June 2017)</u>					<u>9.99</u>
2	<u>for use of Slickplan</u>					
3	<u>website planning tool</u>					
4	<u>(sitemap builder)</u>					
5						
6						
7	<u>* Cal Card purchase for FY17 using existing budget string on BPOA</u>					
8						
9						
10						

**CALCard** Last 4: 7269  
 Order #: \_\_\_\_\_ Order Date: 6/20/17  
 # 40154505917

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

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

SUB-TOTAL	<u>9.99</u>
SALES TAX	<u>0</u>
<b>TOTAL</b> (Not to Exceed \$200.00)	<u>9.99</u>

RECEIVED BY: \_\_\_\_\_  
 DATE: \_\_\_\_\_

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.

REQUESTED BY: Kristy Hart TYPED/PRINT DATE: 6/14/17  
 REQUESTED BY: Kristy Hart SIGNATURE DATE: 6/14/17

Received by	Date
<u>GENED 5890 / 11 / FL CP PISO</u>	
Bus. Unit Account Fund Org	
<u>67100 / 00000 / 2017 / 0510</u>	
Program Sub-Class BY Proj/Grnt	Amount
	<u>\$ 9.99</u>

APPROVED: \_\_\_\_\_ DEAN OR OTHER AUTHORIZED SIGNATURE DATE: 6/15/17  
 APPROVED: \_\_\_\_\_ VICE PRESIDENT, ADMINISTRATION DATE: \_\_\_\_\_

Bus. Unit Account Fund Org	
Program Sub-Class BY Proj/Grnt	Amount
	<u>\$</u>



# iContact®

Please make your payment to:

**iContact LLC**  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 06/05/2017

Due by: 06/05/2017

**Bill to:**

10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6664781	\$36.05	\$36.05	\$0.00

Client	Description	Charge	Credit
	Cancellation of Monthly Subscription (Jun 5, 2017 - Jun 30, 2017) 2,500 Subscribers (2,500 Subscribers Plan)		\$22.19
	iContact Monthly Subscription (Jun 5, 2017 - Jun 30, 2017) 5,000 Subscribers (5,000 Subscribers Plan)	\$36.05	
	\$13.86 Payment via Visa xxxxxxxxxxxx0269, Authorization# 044218		\$13.86
<b>Total Due:</b>			<b>\$0.00</b>

This invoice was paid on 06/05/17. Thank you for your payment!

**Thank you for being our client!**  
iContact



**BLANKET ORDER RELEASE FORM**

ARC	<input type="checkbox"/>	DO	<input type="checkbox"/>
CRC	<input type="checkbox"/>	FM	<input type="checkbox"/>
FLC	<input checked="" type="checkbox"/>	ETW	<input type="checkbox"/>
SCC	<input type="checkbox"/>	OTHER	_____

Release No. <b>FL17005</b>	Purchase Order No. <b>B117465</b>
-------------------------------	--------------------------------------

**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

see below

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
Line #2 - 4/30/17 - Facebook #1063209097127624-2520568	1		1.46	\$ 1.46
				0.00
Line #2 - 5/1/17 - iContact - Invoice # 6628449	1		25.60	25.60
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
<b>Purchases Charged to Categorical Programs, Grants or Special Projects</b> This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ <b>27.06</b>
Program Director/Coordinator Signature N/A		For grants/special projects Program Name Program/Grant Number		
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.

*Jenny Herman* 5/30/17  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

*Kathleen Guikler* 5/31/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

<b>1</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VA.BSOF</b>
PO Line #	Bus. Unit	Account	Fund	Org
67700	00000	2017	041X	\$ 0.00
Program	Sub-Class	BY	Proj/Grant	Amount
<b>2</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VP.PISO</b>
PO Line #	Bus. Unit	Account	Fund	Org
67100	00000	2017	051C	\$ 27.06
Program	Sub-Class	BY	Proj/Grant	Amount

**\$ 27.06**



P.O. BOX 6343  
FARGO ND 58125-6343



**ACCOUNT NUMBER** 4246 0445 5574 3768  
**STATEMENT DATE** 05-22-2017  
**AMOUNT DUE** \$101.41  
**NEW BALANCE** \$101.41

PAYMENT DUE ON RECEIPT

000001915 01 AB 0.403 106481043418630 P Y  
FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

**AMOUNT ENCLOSED**

\$

*Please make check payable to "U.S. Bank"*

U.S. BANK CORPORATE PAYMENT SYSTEM  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000010141 000010141

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	= New Balance	
Company Total	\$74.35	\$27.06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$101.41	

NEW ACTIVITY				
JOANY HARMAN 4246-0470-0037-0269	CREDITS	PURCHASES	CASH ADV	TOTAL ACTIVITY
	\$0.00	\$27.06	\$0.00	\$27.06
Post Date	Tran Date	Reference Number	Transaction Description	Amount
05-01	04-30	24204297120730679121247	FACEBK QWJKMAADN2 650-5434800 CA	1.46
05-02	05-01	24906417121038919848544	VOC*ICONACTEMAIL MKT SVC 877-9683996 MD	25.60

Department: 00000 Total: \$27.06  
Division: 00000 Total: \$27.06

<b>CUSTOMER SERVICE CALL</b>  800-344-5696	<b>ACCOUNT NUMBER</b> 4246-0445-5574-3768		<b>ACCOUNT SUMMARY</b>	
	<b>STATEMENT DATE</b> 05/22/17	<b>DISPUTED AMOUNT</b> .00	PREVIOUS BALANCE 74.35 PURCHASES & OTHER CHARGES 27.06 CASH ADVANCES .00 CASH ADVANCE FEES .00 LATE PAYMENT CHARGES .00 CREDITS .00 PAYMENTS .00	ACCOUNT BALANCE 101.41
<b>SEND BILLING INQUIRIES TO:</b> U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335	<b>AMOUNT DUE</b>  101.41			





DISTRICT OFFICE



U.S. BANCORP SERVICE CENTER  
P. O. Box 6343  
 Fargo, ND 58125-6343

ACCOUNT NUMBER 4246-0470-0037-0269  
STATEMENT DATE 05-22-17  
TOTAL ACTIVITY \$27.06

000031468 01 AB 0.403 106481043484603 P Y

JOANY HARMAN  
FLC BSO GF  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder Joany Harman Date 5/30/17 Approver Houssain Gorklen Date 5/31/17

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
05-01	04-30	FACEBK QWJKMAADN2 650-5434800 CA PUR ID: QWJKMAADN2 TAX: 0.00	24204297120730679121247	7311	1.46
05-02	05-01	VOC*CONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BQ0TE71A59D9 TAX: 0.00	24906417121038919848544	5968	25.60

Default Accounting Code:

CUSTOMER SERVICE CALL  <b>800-344-5696</b>	ACCOUNT NUMBER 4246-0470-0037-0269		ACCOUNT SUMMARY	
	STATEMENT DATE 05-22-17	DISPUTED AMOUNT \$ .00	PREVIOUS BALANCE	\$ .00
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE  \$ 0.00  DO NOT REMIT		PURCHASES & OTHER CHARGES	\$27.06
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			<b>TOTAL ACTIVITY</b>	<b>\$27.06</b>





Please make your payment to:  
iContact LLC  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 05/01/2017

Due by: 05/01/2017

Bill to: **Joany Harman**  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6628449	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Joany Harman	iContact Monthly Subscription (May 1, 2017 - May 31, 2017) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Joany Harman	\$25.60 Payment via Visa xxxxxxxxxxxx0269, Authorization# 030293		\$25.60
<b>Total Due:</b>			<b>\$0.00</b>

This invoice was paid on 05/01/17. Thank you for your payment!

Thank you for being our client!  
iContact



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>FL17004</b>	Purchase Order No. <b>B117465</b>
-------------------------------	--------------------------------------

**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE  
FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

see below

Invoice No, Credit Memo No., or Packing Slip No.  Date Items Received  
 (Please check if attached and write total dollar amount below)

STMT DATE: 04/24/17

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
Line #1 - 3/31/17 - Gallup, Inc. PUR ID: 600730140	1		15.00	\$ 15.00
charge to # GENFD 5890 11 FL.CP.OFFC 67500 00000 2017 041A				0.00
				0.00
Line #2 - 3/31/17 - Facebook #1252248571557003-2456923	1		33.75	33.75
Line #2 - 4/1/17 - iContact - Invoice # 6600054	1		25.60	25.60
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
<b>Purchases Charged to Categorical Programs, Grants or Special Projects</b> This purchase is in compliance with the requirements of _____			<b>Total Amount or Estimate</b>	\$ <b>74.35</b>
Program Director/Coordinator Signature N/A		Program Name For grants/special projects		
Program Goal/Objective Number/Explanation		Program/Grant Number		

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.

*Jenny Harman* 5/10/17  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

*Kathleen Gurkin* 5/10/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

<b>1</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VA.BSOF</b>
PO Line #	Bus. Unit	Account	Fund	Org
<b>67700</b>	<b>00000</b>	<b>2017</b>	<b>041X</b>	<b>\$ 15.00</b>
Program	Sub-Class	BY	Proj/Grant	Amount
<b>2</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FL.VP.PISO</b>
PO Line #	Bus. Unit	Account	Fund	Org
<b>67100</b>	<b>00000</b>	<b>2017</b>	<b>051C</b>	<b>\$ 59.35</b>
Program	Sub-Class	BY	Proj/Grant	Amount

**\$ 74.35**

**ENTERED**  
 (with handwritten initials)





DISTRICT OFFICE

U.S. BANCORP SERVICE CENTER  
P. O. Box 6343  
Fargo, ND 58125-6343

ACCOUNT NUMBER 4246-0470-0037-0269  
STATEMENT DATE 04-24-17  
TOTAL ACTIVITY \$74.35



000026034 01 AB 0.403 106481002639739 P Y

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

JOANY HARMAN  
FLC BSO GF  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder Joany Harman Date 5/10/17 Approver Kathleen Kusler Date 5/10/17

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-31	03-30	GALLUP INC 800-426-0725 NE PUR ID: 600730140 TAX: 0.00	24692167089000847090069	8299	15.00
04-03	03-31	FACEBK YK9NBCNCN2 650-6187714 CA PUR ID: P1252248571557003 TAX: 0.00	24906417090037702349246	7311	33.75
04-04	04-03	VOC*CONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BT0TF7478DEE TAX: 0.00	24906417093037817351845	5968	25.60

Default Accounting Code:

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0470-0037-0269		ACCOUNT SUMMARY	
	STATEMENT DATE 04-24-17	DISPUTED AMOUNT \$ .00	PREVIOUS BALANCE	\$ .00
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$74.35
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			TOTAL ACTIVITY	\$74.35





**LIMITED PURCHASE ORDER**

(Not to Exceed \$200.00)

<p>VENDOR NAME AND ADDRESS: <u>U.S. Bank Cal Card</u></p>	<p>DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call</p>
---	--

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	<u>Gallup Strengths Center Store</u>	<u>1</u>	<u>Access Code</u>		<u>\$15.00</u>	<u>\$15.00</u>
2	<u>Top 5 Strengths Access</u>					
3	<u>for Sharisse Estomo, FLC</u>					
4	<u>Student Services Supervisor</u>					
5	<u>EstomoS@flc.losrios.edu</u>					
6						
7	<u>Part of Strengths Finder Prof. Devel.</u>					
8	<u>Request online order w/credit card</u>					
9						
10						

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

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

SUB-TOTAL	
SALES TAX	
<b>TOTAL</b> (Not to Exceed \$200.00)	<u>\$15.00</u>

**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.

**CALCard** Last 4: 0269  
Order #: \_\_\_\_\_ Order Date: 3/28/17  
600800689

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.

Sondra Lee 3/28/17  
REQUESTED BY: TYPED/PRINT DATE

Sondra Lee 3/28/17  
REQUESTED BY: SIGNATURE DATE

600800689  
GENFD / 5890 / 11 / FL. CP. OFFIC.  
Bus. Unit Account Fund Org

67500 / 0000 / 2014 / 041A \$ 15.00  
Program Sub-Class BY Proj/Grnt Amount

APPROVED: DEAN OR OTHER AUTHORIZED SIGNATURE DATE  
Kathleen Finkler 3/28/17

APPROVED: VICE PRESIDENT, ADMINISTRATION DATE

Bus. Unit Account Fund Org

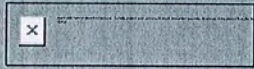
Program Sub-Class BY Proj/Grnt Amount

Gold/Yellow to AAPS w/ BUR



Sabo, Paula

**From:** Gallup Strengths Center <strengthscenter@gallup.com>  
**Sent:** Thursday, March 30, 2017 3:18 PM  
**To:** Sabo, Paula  
**Subject:** New Order # 600800689



GALLUP STRENGTHS CENTER

## Thank you for your purchase

Paula Sabo, thank you for your Gallup Strengths Center purchase. If you purchased access to an assessment, you will receive an additional email with your access code. You can also manage your access codes via your [Code Management](#) page. If you purchased a product that requires shipping, we will send you an email with tracking information when your package ships. For additional questions or issues please view our [Help](#) page.

Thank you,  
The Gallup Strengths Center Team

Your Order #600800689(placed on March 30, 2017 5:17:49 PM CDT)

**Billing Information:**

Joany Harman  
Folsom Lake College  
Folsom Lake College - GF  
10 College Parkway  
Folsom, California, 95630-6798  
United States  
T: 9166086622

**Payment Method:**

Credit Card  
Credit Card  
Type: Visa  
Credit Card  
Number: xxxx-0269

Item	Qty	Subtotal
TOP 5 STRENGTHS ACCESS	1	\$15.00
	Subtotal	\$15.00
	<b>Grand Total (Excl.Tax)</b>	<b>\$15.00</b>
	Tax	\$0.00



**Grand Total (Incl.Tax)**

**\$15.00**

If you have questions about your order, contact us:

Gallup Strengths Center

[strengthscenter@gallup.com](mailto:strengthscenter@gallup.com)

1-888-561-5270

(Monday-Thursday 7 a.m.-7 p.m. CST; Friday 7 a.m.-5 p.m. CST)

All information in this message is confidential and may be legally privileged. Only intended recipients are authorized to use it.

Federal Tax ID Number: 21-0699771

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Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1252248571557003-2456923

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	03/31/2017 6:23am
Amount Billed	\$33.75 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 0269 - Reference Number YK9NBCNCN2
Status	Payment Completed

Billing Activity

For advertising services provided from 03/29/2017 12:00am to 03/29/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6064308041910	Post: "Our Summer & Fall 201...class schedules are now..."	501 Impressions	\$2.85 USD
Total			\$2.85 USD

Billing Activity

For advertising services provided from 03/28/2017 12:00am to 03/28/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6064308041910	Post: "Our Summer & Fall 201...class schedules are now..."	1,416 Impressions	\$5.07 USD
Total			\$5.07 USD

Billing Activity

For advertising services provided from 03/28/2017 12:00am to 03/28/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6064308041910	Post: "Our Summer & Fall 201...class schedules are now..."	1 Impression	\$0.01 USD
Total			\$0.01 USD

Billing Activity

For advertising services provided from 03/27/2017 12:00am to 03/27/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6064308041910	Post: "Our Summer & Fall 201...class schedules are now..."	657 Impressions	\$2.05 USD
Total			\$2.05 USD



6062684095710	Post: "The 2nd 8 week term s...ts next week, with most..."	215 Impressions	\$0.76 USD
---------------	--	-----------------	------------

Total

\$0.76 USD



# iContact®

Please make your payment to:

**iContact LLC**  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 04/01/2017

Due by: 04/01/2017

**Bill to:** Joany Harman  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6600054	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Joany Harman	iContact Monthly Subscription (Apr 1, 2017 - Apr 30, 2017) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Joany Harman	\$25.60 Payment via Visa xxxxxxxxxxxx0269, Authorization# 091251		\$25.60
<b>Total Due:</b>			<b>\$0.00</b>

This invoice was paid on 04/03/17. Thank you for your payment!

Thank you for being our client!  
iContact



ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_



Release No. <b>FL17002</b>	Purchase Order No. <b>B117465</b>
-------------------------------	--------------------------------------

US Bank

SEE INSTRUCTIONS ON REVERSE SIDE  
FOR COMPLETING THIS FORM

Vendor Name (As it appears on Purchase Order) Vendor Code

see below

STMT DATE: 03/20/17

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
#2 Line #1 - 3/1/17 - iContact - Invoice # 6567712	1		25.60	\$ 25.60
<del>CHARGEBACK - GENFD 5890 11 FL.CP.PISO 67100 00000 051C</del>				0.00
				0.00
Line #2 - 2/28/17 - Facebook #1181101985338333-2401161	1		55.00	55.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
Purchases Charged to Categorical Programs, Grants' or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ 80.60
Program Director/Coordinator Signature N/A		For grants/special projects	Program Name	
Program Goal/Objective Number/Explanation			Program/Grant Number	

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.

*Janey Harmon* 4/3/17  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

*Kathleen Kirklin* 4/3/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

1	GENFD	5890	11	FL.VA.BSOF	
PO Line #	Bus. Unit	Account	Fund	Org	
67700	00000	2017	041X		\$ 25.60
Program	Sub-Class	BY	Proj/Grant	Amount	
2	GENFD	5890	11	FL.CP.PISO	
PO Line #	Bus. Unit	Account	Fund	Org	
67100	00000	2017	051C		\$ 55.00
Program	Sub-Class	BY	Proj/Grant	Amount	

\$ 80.60

Pink to P. Sabo  
Orig to ADPS 4/4/17







DISTRICT OFFICE

U.S. BANCORP SERVICE CENTER  
P. O. Box 6343  
Fargo, ND 58125-6343



ACCOUNT NUMBER 4246-0470-0037-0269  
STATEMENT DATE 03-22-17  
TOTAL ACTIVITY \$ 80.60

000024926 01 AB 0.403 106481955930904 P Y

JOANY HARMAN  
FLC BSO GF  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder Joany Harman Date 4/3/17 Approver Kathleen Kubler Date 4/3/17

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-01	02-28	FACEBK NUVAPB6DN2 650-6187714 CA PUR ID: P1181101985338333 TAX: 0.00	24906417059036451392901	7311	55.00
03-02	03-01	VOC*CONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BT0TF582EEB4 TAX: 0.00	24906417060036486240734	5968	25.60

Default Accounting Code:

CUSTOMER SERVICE CALL  <b>800-344-5696</b>	ACCOUNT NUMBER 4246-0470-0037-0269		ACCOUNT SUMMARY	
	STATEMENT DATE 03-22-17	DISPUTED AMOUNT \$ .00	PREVIOUS BALANCE	\$ .00
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE  \$ 0.00  <b>DO NOT REMIT</b>		PURCHASES & OTHER CHARGES	\$80.60
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			<b>TOTAL ACTIVITY</b>	<b>\$80.60</b>





P.O. BOX 6343  
FARGO ND 58125-6343



ACCOUNT NUMBER 4246 0445 5574 3768  
STATEMENT DATE 03-22-2017  
AMOUNT DUE \$244.17  
NEW BALANCE \$244.17

PAYMENT DUE ON RECEIPT

000001737 01 AB 0.403 106481955880265 P Y

FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

AMOUNT ENCLOSED  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEMS  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000024417 000024417

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash + Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	New = Balance	
Company Total	\$565.22	\$80.60	\$0.00	\$0.00	\$0.00	\$0.00	\$401.65	\$244.17	

CORPORATE ACCOUNT ACTIVITY					
FOLSOM LAKE - GF 4246-0445-5574-3768				TOTAL CORPORATE ACTIVITY \$401.65 CR	
Post Date	Tran Date	Reference Number	Transaction Description	Amount	
02-28	02-28	74798267059000000001723	PAYMENT - THANK YOU 00000 C	401.65 PY	

NEW ACTIVITY					
JOANY HARMAN 4246-0470-0037-0269		CREDITS \$0.00	PURCHASES \$80.60	CASH ADV \$0.00	TOTAL ACTIVITY \$80.60
Post Date	Tran Date	Reference Number	Transaction Description	Amount	
03-01	02-28	24906417059036451392901	FACEBK NUVAPB6DN2 650-6187714 CA	55.00	
03-02	03-01	24906417060036486240734	VOC*ICONACTEMAIL MKT SVC 877-9683996 MD	25.60	

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0445-5574-3768		ACCOUNT SUMMARY	
	STATEMENT DATE 03/22/17		DISPUTED AMOUNT .00	PREVIOUS BALANCE PURCHASES & OTHER CHARGES
SEND BILLING INQUIRIES TO: U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335		AMOUNT DUE  244.17	CASH ADVANCES	.00
			CASH ADVANCE FEES	.00
			LATE PAYMENT CHARGES	.00
			CREDITS	.00
			PAYMENTS	401.65
			ACCOUNT BALANCE	244.17





Company Name: FOLSOM LAKE - GF
Corporate Account Number: 4246 0445 5574 3768
Statement Date: 03-22-2017

Department: 00000 Total:  
Division: 00000 Total:

\$80.60  
\$80.60



## Sabo, Paula

---

**From:** Hart, Kristy  
**Sent:** Monday, March 06, 2017 11:21 AM  
**To:** Sabo, Paula; Harman, Joany  
**Subject:** College Credit Card purchases- iContact & Facebook  
**Attachments:** receipt (6).pdf; 2017-02-28T13-45 Transaction #1181101985338333-2401161.pdf

Hi Paula and Joany,

Here are the latest receipts from iContact and Facebook for PISO's use of the college credit card.

iContact – 3/1/17	\$25.60
Facebook – 2/28/17	\$55.00

*line #2*

Please process as usual (sorry for the confusion over last month's receipts).

Thank you,  
Kristy



**Kristy Hart** | Communications & Public Information Officer  
Folsom Lake College | 10 College Parkway | Folsom, CA 95630  
p. 916.608.6993 | f. 916.608-6584 | [hartk@flc.losrios.edu](mailto:hartk@flc.losrios.edu) | [www.flc.losrios.edu](http://www.flc.losrios.edu)



# iContact®

Please make your payment to:

iContact LLC  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 03/01/2017

Due by: 03/01/2017

Bill to: **Joany Harman**  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6567712	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Joany Harman	iContact Monthly Subscription (Mar 1, 2017 - Mar 31, 2017) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Joany Harman	\$25.60 Payment via Visa xxxxxxxxxxxx0269, Authorization# 057457		\$25.60
		<b>Total Due:</b>	<b>\$0.00</b>

This invoice was paid on 03/01/17. Thank you for your payment!

Thank you for being our client!  
iContact





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1181101985338333-2401161

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	02/28/2017 1:45pm
Amount Billed	\$55.00 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 0269 - Reference Number NUVAPB6DN2
Status	Payment Completed

**Billing Activity**

For advertising services provided from 02/18/2017 12:00am to 02/18/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6061309589710	Post: "We are thrilled to la...ch our official Speaker..."	424 Impressions	\$2.79 USD

Total \$2.79 USD

**Billing Activity**

For advertising services provided from 02/17/2017 12:00am to 02/17/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6061309589710	Post: "We are thrilled to la...ch our official Speaker..."	803 Impressions	\$5.30 USD

Total \$5.30 USD

**Billing Activity**

For advertising services provided from 02/16/2017 12:00am to 02/16/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6061309589710	Post: "We are thrilled to la...ch our official Speaker..."	870 Impressions	\$5.59 USD

Total \$5.59 USD

**Billing Activity**

For advertising services provided from 02/15/2017 12:00am to 02/15/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6061309589710	Post: "We are thrilled to la...ch our official Speaker..."	236 Impressions	\$1.32 USD

Total \$1.32 USD



6060277897510	Post: "Applications for the ...som Lake College/Rancho..."	87 Impressions	\$0.75 USD
6060353035710	Post: "It's not too late to enroll at Folsom Lake..."	853 Impressions	\$4.96 USD

Total

\$5.71 USD

### Billing Activity

For advertising services provided from 02/02/2017 12:00am to 02/02/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6060277897510	Post: "Applications for the ...som Lake College/Rancho..."	687 Impressions	\$5.01 USD
6060353035710	Post: "It's not too late to enroll at Folsom Lake..."	712 Impressions	\$4.04 USD

Total

\$9.05 USD

### Billing Activity

For advertising services provided from 02/01/2017 2:30pm to 02/01/2017 5:52pm

Ad ID	Ad Name	Details	Amount
6060277897510	Post: "Applications for the ...som Lake College/Rancho..."	94 Impressions	\$0.72 USD

Total

\$0.72 USD

### Billing Activity

For advertising services provided from 02/01/2017 10:00am to 02/01/2017 3:18pm

Ad ID	Ad Name	Details	Amount
6060277897510	Post: "Applications for the ...som Lake College/Rancho..."	161 Impressions	\$1.24 USD

Total

\$1.24 USD

### Billing Activity

For advertising services provided from 02/01/2017 12:00am to 02/01/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6060277897510	Post: "Applications for the ...som Lake College/Rancho..."	369 Impressions	\$2.28 USD

Total

\$2.28 USD



**BLANKET ORDER RELEASE FORM**

ARC	<input type="checkbox"/>	DO	<input type="checkbox"/>
CRC	<input type="checkbox"/>	FM	<input type="checkbox"/>
FLC	<input checked="" type="checkbox"/>	ETW	<input type="checkbox"/>
SCC	<input type="checkbox"/>	OTHER	_____

Release No. <b>FL17001</b>	Purchase Order No. <b>B117465</b>
-------------------------------	--------------------------------------

**COPY**

**US Bank**

**SEE INSTRUCTIONS ON REVERSE SIDE FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

see below

STMT DATE: 02/22/2017

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
<del>#2</del> Line #1 - 2/1/17 - iContact - Invoice # 6537128	1		25.60	\$ 25.60
<del>CHARGEBACK - GENFD 5890 11 FL.CP.PISO 67100 00000 051C</del>				0.00
				0.00
Line #2 - 1/31/17 - Facebook #1167982069983654-2347421	1		107.97	107.97
Line #2 - 1/31/17 - Facebook #1167982073316987-2347422	1		30.00	30.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ 163.57
Program Name _____				
Program Director/Coordinator Signature _____ N/A				
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.

*Jenny Harman* 4/3/17  
 AUTHORIZED PURCHASER SIGNATURE (must be listed on Purchase Order) Date

*Kathleen Kukler* 4/3/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

1	GENFD	5890	11	FL.VA.BSOF
PO Line #	Bus. Unit	Account	Fund	Org
67700	00000	2017	041X	\$ 25.60
Program	Sub-Class	BY	Proj/Grant	Amount
2	GENFD	5890	11	FL.CP.PISO
PO Line #	Bus. Unit	Account	Fund	Org
67100	00000	2017	051C	\$ 137.97
Program	Sub-Class	BY	Proj/Grant	Amount

**\$ 163.57**

DISTRIBUTION: Accounting: White Business Services: Yellow Purchaser: Pink

Pink to P. Sebo 4/4/17  
 Orig to AOPS 4/4/17

**ENTERED**  
*Prolog*





DISTRICT OFFICE

U.S BANCORP SERVICE CENTER  
P. O. Box 6343  
Fargo, ND 58125-6343

ACCOUNT NUMBER 4246-0470-0037-0269  
STATEMENT DATE 02-22-17  
TOTAL ACTIVITY \$ 163.57

000025068 01 AB 0.403 106481913589490 P Y

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

JOANY HARMAN  
FLC BSO GF  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder Joany Harman Date 4/3/17 Approver Kathleen Gunkler Date 4/3/17

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
02-01	01-31	FACEBK G5SJKBNCN2 650-6187714 CA PUR ID: P1167982073316987 TAX: 0.00	24906417031035314290156	7311	30.00
02-01	01-31	FACEBK F5SJKBNCN2 650-6187714 CA PUR ID: P1167982069983654 TAX: 0.00	24906417031035314290479	7311	107.97
02-02	02-01	VOC*CONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BT0TF3FD28F6 TAX: 0.00	24906417032035336492730	5968	25.60

Default Accounting Code:

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0470-0037-0269		ACCOUNT SUMMARY	
	STATEMENT DATE 02-22-17	DISPUTED AMOUNT \$ .00	PREVIOUS BALANCE	\$ .00
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$163.57
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			TOTAL ACTIVITY	\$163.57



P.O. BOX 6343  
FARGO ND 58125-6343



ACCOUNT NUMBER 4246 0445 5574 3768  
STATEMENT DATE 02-22-2017  
AMOUNT DUE \$565.22  
NEW BALANCE \$565.22  
PAYMENT DUE ON RECEIPT

000001573 01 AB 0.403 106481913547469 P Y

FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

AMOUNT ENCLOSED  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEM  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000056522 000056522

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY

FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	= New Balance
Company Total	\$751.20	\$163.57	\$0.00	\$0.00	\$0.00	\$0.00	\$349.55	\$565.22

CORPORATE ACCOUNT ACTIVITY

Post Date	Tran Date	Reference Number	Transaction Description	Amount
01-30	01-30	74798267030000000000521	PAYMENT - THANK YOU 00000 C	349.55 PY
<b>TOTAL CORPORATE ACTIVITY</b>				<b>\$349.55 CR</b>

NEW ACTIVITY

Post Date	Tran Date	Reference Number	Transaction Description	Amount
02-01	01-31	24906417031035314290156	FACEBK G5SJKBNCN2 650-6187714 CA	30.00
02-01	01-31	24906417031035314290479	FACEBK F5SJKBNCN2 650-6187714 CA	107.97
02-02	02-01	24906417032035336492730	VOC*ICONACTEMAIL MKT SVC 877-9683996 MD	25.60
<b>JOANY HARMAN</b> 4246-0470-0037-0269				<b>CREDITS</b> \$0.00
<b>PURCHASES</b> \$163.57				<b>CASH ADV</b> \$0.00
				<b>TOTAL ACTIVITY</b> \$163.57

CUSTOMER SERVICE CALL

800-344-5696

ACCOUNT NUMBER

4246-0445-5574-3768

STATEMENT DATE

02/22/17

DISPUTED AMOUNT

.00

ACCOUNT SUMMARY

PREVIOUS BALANCE	751.20
PURCHASES & OTHER CHARGES	163.57
CASH ADVANCES	.00
CASH ADVANCE FEES	.00
LATE PAYMENT CHARGES	.00
CREDITS	.00
PAYMENTS	349.55
<b>ACCOUNT BALANCE</b>	<b>565.22</b>

SEND BILLING INQUIRIES TO:

U.S. Bank National Association  
C/O U.S. Bancorp Purchasing Card Program  
P.O. Box 6335  
Fargo, ND 58125-6335

AMOUNT DUE

565.22





Company Name: FOLSOM LAKE - GF
Corporate Account Number: 4246 0445 5574 3768
Statement Date: 02-22-2017

Department: 00000 Total:	\$163.57
Division: 00000 Total:	\$163.57



**Harman, Joany**

---

**From:** Hart, Kristy  
**Sent:** Friday, February 03, 2017 8:42 AM  
**To:** Sabo, Paula; Harman, Joany  
**Subject:** Receipts for college credit card  
**Attachments:** 2017-01-31T13-15 Transaction #1167982069983654-2347421.pdf; 2017-01-31T13-15 Transaction #1167982073316987-2347422.pdf; receipt (5).pdf

Hi Paula and Joany,


Here are the receipts for regular PISO charges made to the college's credit card:

1/31	Facebook	\$107.97	) line #2
1/31	Instagram	\$30.00	
2/1	iContact	\$25.60	

~~line #1~~ line #2

Please deduct from the BPO line item: GENFD 5890 11 FL.CP.PISO 67100 00000 2017 051C

Thank you!  
Kristy

 **Kristy Hart** | Communications & Public Information Officer  
Folsom Lake College | 10 College Parkway | Folsom, CA 95630  
p. 916.608.6993 | f. 916.608-6584 | [hartk@flc.losrios.edu](mailto:hartk@flc.losrios.edu) | [www.flc.losrios.edu](http://www.flc.losrios.edu)



# iContact®

Please make your payment to:  
iContact LLC  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 02/01/2017

Due by: 02/01/2017

Bill to: **Joany Harman**  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6537128	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Joany Harman	iContact Monthly Subscription (Feb 1, 2017 - Feb 28, 2017) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Joany Harman	\$25.60 Payment via Visa xxxxxxxxxxxx0269, Authorization# 016117		\$25.60
		<b>Total Due:</b>	<b>\$0.00</b>

This invoice was paid on 02/01/17. Thank you for your payment!

Thank you for being our client!  
iContact





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1167982069983654-2347421

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	01/31/2017 1:15pm
Amount Billed	\$107.97 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 0269 - Reference Number F5SJKBNCN2
Status	Payment Completed

Billing Activity

For advertising services provided from 01/25/2017 12:00am to 01/26/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709161510	Promise- Apps Coming FB	9 Link Clicks	\$7.69 USD
Total			\$7.69 USD

Billing Activity

For advertising services provided from 01/26/2017 12:00am to 01/27/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709161510	Promise- Apps Coming FB	9 Link Clicks	\$5.31 USD
Total			\$5.31 USD

Billing Activity

For advertising services provided from 01/27/2017 12:00am to 01/27/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709161510	Promise- Apps Coming FB	1 Link Click	\$1.34 USD
Total			\$1.34 USD

Billing Activity

For advertising services provided from 01/27/2017 12:00am to 01/27/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709161510	Promise- Apps Coming FB	12 Link Clicks	\$7.60 USD
Total			\$7.60 USD



For advertising services provided from 01/20/2017 12:00am to 01/20/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059432476310	Post: "Visual Arts Professor...and master potter Brian..."	2 Impressions	\$0.04 USD

Total

\$0.04 USD

#### Billing Activity

For advertising services provided from 01/14/2017 12:00am to 01/14/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058839736910	Post: "One last bit of holid...heer to share with you..."	470 Impressions	\$3.17 USD

Total

\$3.17 USD

#### Billing Activity

For advertising services provided from 01/13/2017 12:00am to 01/13/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058736615310	Post: "Are you ready for the start of the spring..."	332 Impressions	\$3.62 USD
6058839736910	Post: "One last bit of holid...heer to share with you..."	708 Impressions	\$5.06 USD

Total

\$8.68 USD

#### Billing Activity

For advertising services provided from 01/12/2017 12:00am to 01/12/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058736615310	Post: "Are you ready for the start of the spring..."	1,129 Impressions	\$10.13 USD
6058839736910	Post: "One last bit of holid...heer to share with you..."	131 Impressions	\$1.77 USD

Total

\$11.90 USD

#### Billing Activity

For advertising services provided from 01/11/2017 12:00am to 01/11/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058736615310	Post: "Are you ready for the start of the spring..."	607 Impressions	\$4.25 USD

Total

\$4.25 USD

#### Billing Activity

For advertising services provided from 01/05/2017 12:00am to 01/05/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058204254310	Post: "Looking forward to having students back on..."	196 Impressions	\$1.57 USD

Total

\$1.57 USD

#### Billing Activity

For advertising services provided from 01/04/2017 12:00am to 01/04/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6058204254310	Post: "Looking forward to having students back on..."	1,062 Impressions	\$8.43 USD

Total

\$8.43 USD





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

**Transaction #1167982073316987-2347422**

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	01/31/2017 1:15pm
Amount Billed	\$30.00 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx 0269 - Reference Number G5SJKBNCN2
Status	Payment Completed

**Billing Activity**

For advertising services provided from 01/29/2017 12:00am to 01/29/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	2 Link Clicks	\$2.96 USD
Total			\$2.96 USD

**Billing Activity**

For advertising services provided from 01/28/2017 12:00am to 01/28/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	1 Link Click	\$4.31 USD
Total			\$4.31 USD

**Billing Activity**

For advertising services provided from 01/27/2017 12:00am to 01/27/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	2 Link Clicks	\$2.59 USD
Total			\$2.59 USD

**Billing Activity**

For advertising services provided from 01/26/2017 12:00am to 01/26/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	3 Link Clicks	\$4.46 USD
Total			\$4.46 USD



**Billing Activity**

For advertising services provided from 01/23/2017 12:00am to 01/26/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	4 Link Clicks	\$5.98 USD

Total

\$5.98 USD

**Billing Activity**

For advertising services provided from 01/24/2017 12:00am to 01/24/2017 11:59pm

Ad ID	Ad Name	Details	Amount
6059709837710	Promise- Appls Coming IG	5 Link Clicks	\$9.70 USD

Total

\$9.70 USD



**BLANKE ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386076</b>	Purchase Order No. <b>B117465</b>
------------------------------	--------------------------------------

US BANK - CalCard

Vendor Name (As it appears on Purchase Order) Vendor Code

**SEE INSTRUCTIONS ON REVERSE SIDE  
FOR COMPLETING THIS FORM**

STMT DATE: 01/23/17

Invoice No, Credit Memo No., or Packing Slip No. \_\_\_\_\_ Date Items Received \_\_\_\_\_  
 (Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
NAACLS # PG0076047568 1/9/17 <i>Olney Harman - 2/6/17</i>				300.00 NT
BLUEHOST # 31013146 1/20/17				101.65 NT
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ <b>401.65</b>
Program Director/Coordinator Signature _____		Program Name _____	Program/Grant Number _____	
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.

*Olney Harman 2/6/17*  
 AUTHORIZED PURCHASER SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
 (must be listed on Purchase Order)

*Kathleen Kerker 2/7/17*  
 APPROVED: \_\_\_\_\_ Date \_\_\_\_\_  
 SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE

**1 GENFD 5890 / 11 / FL.VA.BSOF**

PO Line #	Bus. Unit	Account	Fund	Org
67700	00000	2017	041X	\$ 401.65
Program	Sub-Class	BY	Proj/Grant	Amount

PO Line #	Bus. Unit	Account	Fund	Org
				\$
Program	Sub-Class	BY	Proj/Grant	Amount

1/18/17



P.O. BOX 6343  
FARGO ND 58125-6343



**ACCOUNT NUMBER** 4246 0445 5574 3768  
**STATEMENT DATE** 01-23-2017  
**AMOUNT DUE** \$751.20  
**NEW BALANCE** \$751.20

PAYMENT DUE ON RECEIPT

000001757 01 AB 0.403 106481868614975 P

FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

**AMOUNT ENCLOSED**  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEMS  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000075120 000075120

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	+ Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	=	New Balance
Company Total	\$425.15	\$401.65	\$0.00	\$0.00	\$0.00	\$0.00	\$75.60		\$751.20

CORPORATE ACCOUNT ACTIVITY					
FOLSOM LAKE - GF 4246-0445-5574-3768					TOTAL CORPORATE ACTIVITY \$75.60CR
Post Date	Tran Date	Reference Number	Transaction Description		Amount
12-29	12-29	7479826636400000000917	PAYMENT - THANK YOU 00000 C		75.60 PY

NEW ACTIVITY					
JOANY HARMAN 4246-0470-0037-0269		CREDITS \$0.00	PURCHASES \$401.65	CASH ADV \$0.00	TOTAL ACTIVITY \$401.65
Post Date	Tran Date	Reference Number	Transaction Description		Amount
01-10	01-09	24692167009000724752960	IN *NAACLS 773-7148880 IL		300.00
01-23	01-20	24906417020034918537990	BLU*FLCINNOVATION.ORG 888-4014678 UT		101.65

<b>CUSTOMER SERVICE CALL</b>  800-344-5696	<b>ACCOUNT NUMBER</b> 4246-0445-5574-3768		<b>ACCOUNT SUMMARY</b>	
	<b>STATEMENT DATE</b> 01/23/17	<b>DISPUTED AMOUNT</b> .00	PREVIOUS BALANCE	425.15
<b>SEND BILLING INQUIRIES TO:</b> U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335	<b>AMOUNT DUE</b>  751.20		PURCHASES & OTHER CHARGES	401.65
			CASH ADVANCES	.00
			CASH ADVANCE FEES LATE PAYMENT CHARGES	.00
			CREDITS	.00
			PAYMENTS	75.60
			<b>ACCOUNT BALANCE</b>	751.20



**REGISTRATION FORM**  
**The NAACLS Self-Study:**  
**Guidelines for Program Directors and Volunteer Reviewers**  
February 23, 2017

PAYMENT - Please check one:

- \$300/person (EARLY REGISTRATION by 1/10/17)
- \$325/person (STANDARD REGISTRATION BETWEEN 1/11/17 to 2/10/17)

- I'm paying by Check (enclosed)
- I'm paying by Purchase Order (indicate purchase order #) T-115800 PO-0500
- I'm paying by Credit Card (indicate information at bottom of page)

Name: Dr/Mr/Mrs/Ms Jason Pedro  
First Name Last Name

Credentials: CLS, MBA, MLCM

Title: MLT Program Director

Program Type/Level: MLT

Institution: Folsom Lake College

Mailing Address: 6699 Campus Dr. #10

City/State/Zip Code: Placerville, CA 95667

Telephone: (916) 612-5639 Fax: ( )

Email: Pedro.j.offic.losrios.edu

*Information critical to the workshop is sent via email. In order to receive workshop handouts, please provide us with a working email address.*

Do you have any dietary restrictions?  
If so, please indicate, i.e., gluten free, vegetarian, allergy: No Pecons or avocado

**FOUR WAYS TO REGISTER AND PAY:**

**(1) MAIL REGISTRATION FORM AND CHECK TO:**  
NAACLS Workshops; 5600 N. River Road, Suite 720; Rosemont, Illinois 60018

**(2) EMAIL REGISTRATION FORM to [efrazier@naacsl.org](mailto:efrazier@naacsl.org) AND MAIL CHECK TO:**  
NAACLS Workshops; 5600 N. River Road, Suite 720; Rosemont, Illinois 60018

**(3) EMAIL REGISTRATION FORM AND PURCHASE ORDER INVOICE TO: [efrazier@naacsl.org](mailto:efrazier@naacsl.org)**

**(4) EMAIL REGISTRATION FORM AND CREDIT CARD INFORMATION TO: [efrazier@naacsl.org](mailto:efrazier@naacsl.org)**  
Card Number \_\_\_\_\_ Security Code \_\_\_\_\_

Expiration Date (MM/YY) \_\_\_\_\_

Type (circle one)    Visa    MC    AMEX

Print name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_



**Harman, Joany**

---

**From:** Ever Jean Frazier <EFrazier@naaccls.org>  
**Sent:** Monday, January 09, 2017 11:07 AM  
**To:** Harman, Joany  
**Subject:** Copy of payment receipt from NAACLS

**Dear Joany Harman**

Below is the sales receipt provided to you by NAACLS

<b>NAACLS</b>		<b>Receipt</b>	
5600 N RIVER RD STE 720, ROSEMONT, IL 60018			
<b>Transaction Type</b>	Sale	<b>Amount</b>	\$300.00
<b>Cardholder Name</b>	Joany Harman	<b>Credit Card Number</b>	...0269
<b>Card Type</b>	Visa		
<b>Date &amp; Time</b>	01/09/2017 - 11:01 PST	<b>Authorization Code</b>	075901
<b>Transaction ID</b>	PG0076047568		

**Thank you for your order,**  
NAACLS

[FRANSCHWARTZCPA@SBCGLOBAL.NET](mailto:FRANSCHWARTZCPA@SBCGLOBAL.NET)

Please do not reply to this message as we are unable to respond to questions at this e-mail address.







Thank you for your purchase

A copy of this receipt has been sent to [dowellz@fic.losrios.edu](mailto:dowellz@fic.losrios.edu). If you experience any problems related to this order, please contact us at 888-401-4678. Please reference invoice #31013146.

Items Purchased

description	domain	date from	date thru	quantity	unit price	subtotal
Dedicated IP	ficinnovation.org	2017-01-20	2018-06-19	16.97 months	\$5.99	\$101.65

Subtotal	\$101.65
Total	\$101.65
Amount Paid	\$101.65
Balance Due	\$0.00

manage my addon products

customer information

Your new products may require setup in order to use them effectively. The button(s) below will direct you where to go:

Company:



# Los Rios Community College District

## Requisition

Req. No. **823692**  
P.O. No.

Page \_\_\_\_ of \_\_\_\_

DATE 11/23/16 VENDOR BlueHost  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_

Vendor Code 26751  
Approved by / Date \_\_\_\_\_  
Reviewed by / Date \_\_\_\_\_  
Dispatched Method / Date \_\_\_\_\_

DELIVERY INSTRUCTIONS  
04 ASPH 130  
Department Building Location INNO  
FLC Department ETE  
College/District Location  
ETE Date Required 12/1/16  
Division

ITEM	DESCRIPTION	ORDERED		AMOUNT	
		QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
1	<i>21.6 month Hosting f1innovator.org</i>				<i>129.38</i>
2					
3					
4					
5					
6	<del>US BANK - CAL CARD</del>				
7					
8					
9					
10	<b>CALCard</b> Last 4: <u>0069</u> <u>7043</u>				
11	Order # <u>31013</u> Order Date: <u>1/20/17</u> <u>146</u>				
12					
13					

**Purchases Charged to Categorical Programs, Grants or Special Projects**  
This purchase is in compliance with the requirements of \_\_\_\_\_

Program Name Lofters  
Project/Grant Number 700P

Tax 0  
Total 129.38

Program Director/Coordinator Signature \_\_\_\_\_  
Program Goal/Objective Number/Explanation Eligible essential services

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.

Bus. Unit	Account	* Fund	Org	Amount
<u>61900</u>	<u>0000</u>	<u>2017</u>	<u>700P</u>	\$ <u>129.38</u>
Program	Sub-Class	BY	Proj/Grnt	
/	/	/	/	

REQUESTED BY: T. Hendrichs TYPED/PRINT DATE 11/23/16  
REQUESTED BY: [Signature] SIGNATURE DATE 11/23/16  
AUTHORIZED: [Signature] DEAN OR AUTHORIZED SIGNATURE DATE 11/23/16  
APPROVED: [Signature] VICE PRESIDENT, ADMINISTRATION DATE 12/8/16

\*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**





fcinnovation.org (shared)

- hosting
- WordPress tools
- domains
- addons
- account
- cart
- help
- logout

### Shopping Cart

#### Items To Be Purchased

description	domain	date from	date thru	quantity	unit price	subtotal	
Dedicated IP	fcinnovation.org	2016-09-01	2018-06-19	21.6 months	\$5.99	\$129.38	
						<b>Subtotal</b>	<b>\$129.38</b>
						<b>Total</b>	<b>\$129.38</b>

#### Payment Information

- Use New Credit Card
- Use PayPal

Name: Zachary Dowell  
 CVV2 (Example):

- Do not send receipt

[clear shopping cart](#) [continue shopping](#) [process order](#)

?

#### getting started

- training videos
- free webinars
- settings

#### products

- domains
- addons

#### support

- contact
- live chat
- create ticket
- ticket history
- knowledgebase
- validation token

#### company

- about us
- partners
- affiliates
- careers
- terms of service



ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386075</b>	Purchase Order No. <b>B117465</b>
------------------------------	--------------------------------------

**SEE INSTRUCTIONS ON REVERSE SIDE  
FOR COMPLETING THIS FORM**

US BANK  
Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
Facebook #1095028747278986-2231679 11/30/14				15.00
iContact #6474345 12/1/16				25.60
TheMadShop #161220-105530-6526 12/30/16				308.95
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____			Total Amount or Estimate	\$ 349.55
Program Director/Coordinator Signature _____	For grants/special projects	Program Name		
Program Goal/Objective Number/Explanation _____		Program/Grant Number		

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.

1	GENED	5890	11	FL.VA.PSOF	
PO Line #	Bus. Unit	Account	Fund	Org	
67700	00000	2017	041X		\$ 334.55
Program	Sub-Class	BY	Proj/Grant	Amount	
2	GENED	5890	11	FL.CP.PISD	
PO Line #	Bus. Unit	Account	Fund	Org	
67100	00000	2017	051C		\$ 15.00
Program	Sub-Class	BY	Proj/Grant	Amount	

Jane Harman 1/3/17  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

Kathleen Kubla 1/5/17  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

ENTERED  
 Bob Log

2017 1/5/17



P.O. BOX 6343  
FARGO ND 58125-6343



ACCOUNT NUMBER 4246 0445 5574 3768  
STATEMENT DATE 12-22-2016  
AMOUNT DUE \$425.15  
NEW BALANCE \$425.15  
PAYMENT DUE ON RECEIPT

B117465  
BOR  
386075



000001776 01 AB 0.399 106481821777666 P  
FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

AMOUNT ENCLOSED  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEM:  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000042515 000042515

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	New = Balance	
Company Total	\$265.89	\$349.55	\$0.00	\$0.00	\$0.00	\$0.00	\$190.29	\$425.15	

CORPORATE ACCOUNT ACTIVITY										
FOLSOM LAKE - GF 4246-0445-5574-3768						TOTAL CORPORATE ACTIVITY \$190.29CR				
Post Date	Tran Date	Reference Number	Transaction Description				Amount			
12-01	12-01	7479826633600000002116	PAYMENT - THANK YOU 00000 C				190.29 PY			

NEW ACTIVITY										
JOANY HARMAN 4246-0400-1996-7076		CREDITS \$0.00	PURCHASES \$40.60	CASH ADV \$0.00	TOTAL ACTIVITY \$40.60					
Post Date	Tran Date	Reference Number	Transaction Description				Amount			
12-01	11-30	24906416335032939001410	FACEBK Y3VNWAJCN2 650-6187714 CA				15.00			
12-02	12-01	24906416336032984206368	VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD				25.60			

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0445-5574-3768		ACCOUNT SUMMARY	
	STATEMENT DATE 12/22/16	DISPUTED AMOUNT .00	PREVIOUS BALANCE	265.89
		PURCHASES & OTHER CHARGES	349.55	
		CASH ADVANCES	.00	
		CASH ADVANCE FEES	.00	
		LATE PAYMENT CHARGES	.00	
		CREDITS	.00	
		PAYMENTS	190.29	
		AMOUNT DUE	425.15	
		ACCOUNT BALANCE	425.15	

SEND BILLING INQUIRIES TO:  
U.S. Bank National Association  
C/O U.S. Bancorp Purchasing Card Program  
P.O. Box 6335  
Fargo, ND 58125-6335





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1095028747278986-2231679

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	11/30/2016 6:25am
Amount Billed	\$15.00 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 7076 - Reference Number Y3VNWAJCN2
Status	Payment Completed

Billing Activity

For advertising services provided from 11/10/2016 12:00am to 11/10/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6054583918710	Post: "Student Taylor Zenobi...as organized a positive..."	1,060 Impressions	\$5.33 USD

Total \$5.33 USD

Billing Activity

For advertising services provided from 11/09/2016 12:00am to 11/09/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6054583918710	Post: "Student Taylor Zenobi...as organized a positive..."	2,442 Impressions	\$9.67 USD

Total \$9.67 USD





Please make your payment to:

**iContact LLC**  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 12/01/2016

Due by: 12/01/2016

**Bill to: Folsom Lake College**  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6474345	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Folsom Lake ...	iContact Monthly Subscription (Dec 1, 2016 - Dec 31, 2016) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Folsom Lake ...	\$25.60 Payment via Visa xxxxxxxxxxxx7076, Authorization# 086978		\$25.60
<b>Total Due:</b>			<b>\$0.00</b>

This invoice was paid on 12/01/16. Thank you for your payment!

Thank you for being our client!  
iContact



Harman, Joany

**From:** PayPal <service@paypal.com>  
**Sent:** Tuesday, December 20, 2016 10:58 AM  
**To:** Harman, Joany  
**Subject:** Your receipt for payment to TMS & CAButtons

*The Mad Shop*



You paid \$308.95 USD to  
TMS & CAButtons



Thanks for using PayPal, Joany Harman

Create a PayPal account in just a few seconds so every checkout is a snap!

[Activate PayPal Now](#)

### Payment details

For your purchase on December 20, 2016

#### Details

Order 161220-105530-6526	\$308.95 USD
Subtotal	\$308.95 USD



**Total**

**\$308.95 USD**

**Paid with**

**VISA x-7076**

The transaction will appear on your statement as PayPal \*PAYPAL \*THEMADSHOP

**Ship to**

10 College Parkway  
Folsom, CA 95630  
UNITED STATES OF AMERICA

Invoice ID: 161220-105530-6526

**Merchant details**

TMS & CAButtons  
californiabuttons@gmail.com  
8182925284



**Right to Refund**

You, the customer, are entitled to a refund of the money to be transmitted as a result of this agreement if PayPal, Inc. does not forward the money received from you within 10 days of the date of its receipt, or does not give instructions committing an equivalent amount of money to the person designated by you within 10 days of the date of the receipt of the funds from you unless otherwise instructed by you.

If your instructions as to when the money shall be forwarded or transmitted are not complied with and the money has not yet been forwarded or transmitted, you have a right to a refund of your money. If you want a refund, you must mail or deliver your written request to PayPal, Inc. at P.O. Box 45950, Omaha, NE 68145-0950.

If you do not receive your refund, you may be entitled to your money back plus a penalty of up to \$1000 and attorney's fees pursuant to Section 2102 of the California Financial Code.

PayPal, Inc., 2211 N. First St., San Jose, CA 95131.



# Los Rios Community College District

CALCARD

## Requisition

Page \_\_\_\_\_ of \_\_\_\_\_

US BANK - CALCARD

Req. No. 821590

P.O. No. CALCARD

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

DATE 12/8/16 VENDOR The Mad Shop

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE CA ZIP \_\_\_\_\_

E-MAIL sales@thomashop.com

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

DELIVERY INSTRUCTIONS

FR-113

Department Building Location  
Folsom Lake / Student Life

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	2 1/4" Pin Buttonmaker Machine Kit	1	ea.	174.99	174.99
2	(MS150 model) - KIT				
3					
4	2 1/4" Pin Button/Badges Set (1000ps)	1	ea.	108.45	108.45
5					
6					
7					
8					
9					
10	CALCard Last 4: <u>2076</u>				
11	Order #: <u>101220</u> - Order Date: <u>12/2/16</u>				
12	<u>105530-6524</u>				
13					

**Purchases Charged to Categorical Programs, Grants or Special Projects**

This purchase is in compliance with the requirements of SSSP

Program Name: SSSP 397N

Project/Grant Number: \_\_\_\_\_

Program Director/Coordinator Signature: Melvin Dix

Program Goal/Objective Number/Explanation: \_\_\_\_\_

Tax: 25.81

Total: 308.95

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.

GENFD/4500 / 12 / TL VS. SSSP

Bus. Unit	Account	* Fund	Org	
63000	60000	2017	597N	\$ 308.95
Program	Sub-Class	BY	Proj/Grnt	Amount
	/	/	/	
Bus. Unit	Account	* Fund	Org	
	/	/	/	\$
Program	Sub-Class	BY	Proj/Grnt	Amount

REQUESTED BY: Genevieve Strickberry TYPED/PRINT DATE 12/8/16

REQUESTED BY: Melvin Dix SIGNATURE DATE 12/8/16

AUTHORIZED: Melvin Dix DEAN OR AUTHORIZED SIGNATURE DATE 12/8/16

APPROVED: Kathleen Ferklaw VICE PRESIDENT, ADMINISTRATION DATE 12/20/16

\* 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



# Your Order: #161220-105530-6526 - Pending

[Order History](#)

## Customer Information

### Billing Address

Joany Harman  
Folsom Lake College  
10 College Parkway  
Folsom  
California, 95630  
United States

### Delivery Address

Gen Siwabessy  
Folsom Lake College Receiving  
10 College Parkway  
Folsom  
California, 95630  
United States

## Comments

"REQ821590 CALCARD "

## Order Summary

Product	Quantity	Price
2-1/4" Pin Button Maker Machine Set (MS150 model) - ms150kit (\$174.99)	1	\$174.99
2-1/4" inch Pin Button / Badges Set (1000 pcs.) - 2.25pb1000 (\$108.45) For use with Machine Model: MS250 Shipping Option: UPS Ground (Free)	1	\$108.45
	Subtotal	\$283.44
	Shipping	\$0.00
	CA Sales Tax	\$25.51
	<b>Grand Total</b>	<b>\$308.95</b>



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386071</b>	Purchase Order No. <b>B117465</b>
------------------------------	--------------------------------------

**SEE INSTRUCTIONS ON REVERSE SIDE  
FOR COMPLETING THIS FORM**

US BANK  
Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
(Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
Facebook # 1066898406758687-2177168 10/31/16				50.00
iContact LLC # 6438950 11/01/16				25.60
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ <b>75.60</b>
Program Director/Coordinator Signature _____	For grants/special projects	Program Name	Program/Grant Number	
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.

James Harman 11/28/16  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

Kathleen Kublin 12/2/16  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

1	GENFD	5890	11	FL.VA.BSOF	
PO Line #	Bus. Unit	Account	Fund	Org	
67700	00000	2017	041X		\$ 25.60
Program	Sub-Class	BY	Proj/Grant	Amount	
2	GENFD	5890	11	FL.Q.P.P150	
PO Line #	Bus. Unit	Account	Fund	Org	
67100	00000	2017	051C		\$ 50.00
Program	Sub-Class	BY	Proj/Grant	Amount	

**ENTERED**  
Bar Log  
11/17



P.O. BOX 6343  
FARGO ND 58125-6343



**ACCOUNT NUMBER** 4246 0445 5574 3768  
**STATEMENT DATE** 11-22-2016  
**AMOUNT DUE** \$265.89  
**NEW BALANCE** \$265.89  
PAYMENT DUE ON RECEIPT

000001934 01 AB 0.399 106481775326815 P  
FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

**AMOUNT ENCLOSED**  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYST  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000026589 000026589

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	New = Balance	
Company Total	\$992.59	\$75.60	\$0.00	\$0.00	\$0.00	\$802.30	\$0.00	\$265.89	

NEW ACTIVITY				
JOANY HARMAN 4246-0400-1996-7076	CREDITS	PURCHASES	CASH ADV	TOTAL ACTIVITY
	\$802.30	\$75.60	\$0.00	\$726.70 CR

Post Date	Tran Date	Reference Number	Transaction Description	Amount
10-28	10-05	24492156279637007540170	THE FLYING FISH THEFLYINGFISH FL	802.30 CR
11-01	10-31	24906416305031828197228	FACEBK ZRBMNAJCN2 650-6187714 CA	50.00
11-02	11-01	24906416306031860668317	VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD	25.60

Department: 00000 Total: \$726.70CR  
Division: 00000 Total: \$726.70CR

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0445-5574-3768		ACCOUNT SUMMARY	
	STATEMENT DATE 11/22/16	DISPUTED AMOUNT .00	PREVIOUS BALANCE	992.59
SEND BILLING INQUIRIES TO: U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335		PURCHASES & OTHER CHARGES 75.60		
		CASH ADVANCES .00		
AMOUNT DUE  265.89		CASH ADVANCE FEES .00		
		LATE PAYMENT CHARGES .00		
		CREDITS 802.30		
		PAYMENTS .00		
		ACCOUNT BALANCE	265.89	





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1066898406758687-2177168

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	10/31/2016 6:45am
Amount Billed	\$50.00 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 7076 - Reference Number ZRBMNAJCN2
Status	Payment Completed

Billing Activity

For advertising services provided from 10/27/2016 12:00am to 10/27/2016 11:59pm

Ad ID	Ad Name	Details	Amount
605355235310	Post: "It's already time to ...nk Spring! FLC's Spring..."	545 Impressions	\$5.04 USD
Total			\$5.04 USD

Billing Activity

For advertising services provided from 10/26/2016 12:00am to 10/26/2016 11:59pm

Ad ID	Ad Name	Details	Amount
605355235310	Post: "It's already time to ...nk Spring! FLC's Spring..."	1,369 Impressions	\$10.62 USD
Total			\$10.62 USD

Billing Activity

For advertising services provided from 10/25/2016 12:00am to 10/25/2016 11:59pm

Ad ID	Ad Name	Details	Amount
605355235310	Post: "It's already time to ...nk Spring! FLC's Spring..."	1,472 Impressions	\$9.29 USD
Total			\$9.29 USD

Billing Activity

For advertising services provided from 10/24/2016 12:00am to 10/24/2016 11:59pm

Ad ID	Ad Name	Details	Amount
605355235310	Post: "It's already time to ...nk Spring! FLC's Spring..."	1,012 Impressions	\$5.05 USD
Total			\$5.05 USD



### Billing Activity

For advertising services provided from 10/22/2016 12:00am to 10/22/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6053395198510	Post: "Pre-Health Profession...liance Club member Kyli..."	795 Impressions	\$7.50 USD

Total

\$7.50 USD

### Billing Activity

For advertising services provided from 10/21/2016 12:00am to 10/21/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6053395198510	Post: "Pre-Health Profession...liance Club member Kyli..."	2 Impressions	\$0.02 USD

Total

\$0.02 USD

### Billing Activity

For advertising services provided from 10/21/2016 12:00am to 10/21/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6053395198510	Post: "Pre-Health Profession...liance Club member Kyli..."	1,562 Impressions	\$12.48 USD

Total

\$12.48 USD





Please make your payment to:  
iContact LLC  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 11/01/2016

Due by: 11/01/2016

Bill to: Folsom Lake College  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6438950	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Folsom Lake ...	iContact Monthly Subscription (Nov 1, 2016 - Nov 30, 2016) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Folsom Lake ...	\$25.60 Payment via Visa xxxxxxxxxxxx7076, Authorization# 024405		\$25.60
<b>Total Due:</b>			\$0.00

This invoice was paid on 11/01/16. Thank you for your payment!

Thank you for being our client!  
iContact



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386069</b>	Purchase Order No. <b>B 117465</b>
------------------------------	---------------------------------------

**SEE INSTRUCTIONS ON REVERSE SIDE  
 FOR COMPLETING THIS FORM**

US BANK  
 Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
 (Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
Facebook #1048571178591407-2125292 9/30/16				158.11
Facebook #1048571185258073-2125294 9/30/16				6.58
Contact 6405653 10/1/16				25.60
<b><u>The Flying Fish - IN DISPUTE - DO NOT PAY</u></b>				
<b>Purchases Charged to Categorical Programs, Grants or Special Projects</b>			<b>Total Amount or Estimate</b>	<b>\$ 190.29</b>
This purchase is in compliance with the requirements of _____				
Program Director/Coordinator Signature _____	For grants/special projects _____	Program Name _____		
Program Goal/Objective Number/Explanation _____			Program/Grant Number _____	

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.

Jenny Harmon 11/1/16  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

Kathleen Kubler 11/1/16  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

1	GENFD	5890	11	FLVA.BSOF	
PO Line #	Bus. Unit	Account	Fund	Org	
67700	00000	2017	041X		\$ 25.60
Program	Sub-Class	BY	Proj/Grant	Amount	
2	GENFD	5890	11	FL.CP.PISO	
PO Line #	Bus. Unit	Account	Fund	Org	
67700	00000	2017	051C		\$ 164.69
Program	Sub-Class	BY	Proj/Grant	Amount	

**ENTERED**  
 Box 109  
 11/1/16

2DD 11/1/16





P.O. BOX 6343  
FARGO ND 58125-6343



ACCOUNT NUMBER 4246 0445 5574 3768  
STATEMENT DATE 10-24-2016  
AMOUNT DUE \$992.59  
NEW BALANCE \$992.59

PAYMENT DUE ON RECEIPT

000001926 01 AB 0.399 106481733302551 P  
FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

AMOUNT ENCLOSED  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEM  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000099259 000099259

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	+ Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	= New Balance	
Company Total	\$84.20	\$992.59	\$0.00	\$0.00	\$0.00	\$0.00	\$84.20	\$992.59	

CORPORATE ACCOUNT ACTIVITY										
FOLSOM LAKE - GF 4246-0445-5574-3768					TOTAL CORPORATE ACTIVITY \$84.20CR					
Post Date	Tran Date	Reference Number	Transaction Description				Amount			
10-18	10-18	74798266292000000001581	PAYMENT - THANK YOU 00000 C				84.20 PY			

NEW ACTIVITY										
JOANY HARMAN 4246-0400-1996-7076		CREDITS \$0.00	PURCHASES \$992.59	CASH ADV \$0.00	TOTAL ACTIVITY \$992.59					
Post Date	Tran Date	Reference Number	Transaction Description				Amount			
10-03	09-30	24906416274030740744320	FACEBK 8GJDHA6CN2 650-6187714 CA				158.11			
10-03	09-30	24906416274030740749584	FACEBK AGJDHA6CN2 650-6187714 CA				6.58			
10-04	10-03	24906416277030857767517	VOC*ICONTACTEMAIL MKT SVC 877-9683996 MD				25.60			
10-06	10-05	24492156279637007540170	THE FLYING FISH THEFLYINGFISH FL				802.30			

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER  4246-0445-5574-3768		ACCOUNT SUMMARY		
	STATEMENT DATE 10/24/16	DISPUTED AMOUNT .00	PREVIOUS BALANCE	84.20	PURCHASES & OTHER CHARGES
SEND BILLING INQUIRIES TO: U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335		AMOUNT DUE  992.59		CASH ADVANCES	.00
				CASH ADVANCE FEES	.00
				LATE PAYMENT CHARGES	.00
				CREDITS	.00
				PAYMENTS	84.20
				ACCOUNT BALANCE	992.59





DISTRICT OFFICE



U.S. BANCORP SERVICE CENTER  
P. O. Box 6343  
Fargo, ND 58125-6343

ACCOUNT NUMBER 4246-0400-1996-7076  
STATEMENT DATE 10-24-16  
TOTAL ACTIVITY \$ 992.59

000024973 01 AT 0.399 106481733376663 P

"MEMO STATEMENT ONLY"  
DO NOT REMIT PAYMENT

JOANY HARMAN  
FLC BSO GF  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder: Joany Harman 11/16 Date: 11/16  
Approver: Kathleen Kurkin 11/16 Date: 11/16

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
10-03	09-30	FACEBK 8GJDHA6CN2 650-6187714 CA PUR ID: P1048571178591407 TAX: 0.00	24906416274030740744320	7311	158.11
10-03	09-30	FACEBK AGJDHA6CN2 650-6187714 CA PUR ID: P1048571185258073 TAX: 0.00	24906416274030740749584	7311	6.58
10-04	10-03	VOC*CONTACTEMAIL MKT SVC 877-9683996 MD PUR ID: BQ0TDC155F40 TAX: 0.00	24906416277030857767517	5968	25.60
10-06	10-05	THE FLYING FISH THEFLYINGFISH FL PUR ID: 00754017 TAX: 0.00	24492156279637007540170	5941	802.30 *

\* IN DISPUTE, DO NOT PAY, # 10672260CT16

Default Accounting Code:

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER 4246-0400-1996-7076		ACCOUNT SUMMARY	
	STATEMENT DATE 10-24-16	DISPUTED AMOUNT \$ .00	PREVIOUS BALANCE	\$ .00
SEND BILLING INQUIRIES TO:  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE  \$ 0.00  DO NOT REMIT		PURCHASES & OTHER CHARGES	\$992.59
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			TOTAL ACTIVITY	\$992.59





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1048571178591407-2125292

Description Facebook Ads Payment

Account 4105408242920

Transaction Date 09/30/2016 7:58am

Amount Billed \$158.11 USD

Billing Reason Remaining ad costs at the end of the month.

Method VISA xxxx xxxx xxxx 7076 - Reference Number 8GJDHA6CN2

Status Payment Completed

Billing Activity

For advertising services provided from 09/26/2016 12:00am to 09/26/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	1,464 Impressions	\$11.37 USD

Total \$11.37 USD

Billing Activity

For advertising services provided from 09/25/2016 12:00am to 09/25/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	2,267 Impressions	\$18.05 USD
6051542403110	Post: <a href="#">/foisomlakecollege/pos...s/10154583674589974</a> to fans	680 Impressions	\$5.24 USD

Total \$23.29 USD

Billing Activity

For advertising services provided from 09/24/2016 12:00am to 09/24/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	2,364 Impressions	\$19.11 USD
6051542403110	Post: <a href="#">/foisomlakecollege/pos...s/10154583674589974</a> to fans	1,391 Impressions	\$10.11 USD

Total \$29.22 USD

Billing Activity

For advertising services provided from 09/24/2016 12:00am to 09/24/2016 11:59pm



Ad ID	Ad Name	Details	Amount
6051542403110	Post: /folsomlakecollege/pos...s/10154583674589974 to fans	1 Impression	\$0.01 USD

Total

\$0.01 USD

#### Billing Activity

For advertising services provided from 09/23/2016 12:00am to 09/23/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	2,416 Impressions	\$18.11 USD
6051542403110	Post: /folsomlakecollege/pos...s/10154583674589974 to fans	780 Impressions	\$4.64 USD

Total

\$22.75 USD

#### Billing Activity

For advertising services provided from 09/22/2016 12:00am to 09/22/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	2,447 Impressions	\$19.25 USD

Total

\$19.25 USD

#### Billing Activity

For advertising services provided from 09/21/2016 12:00am to 09/21/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	2,567 Impressions	\$19.94 USD

Total

\$19.94 USD

#### Billing Activity

For advertising services provided from 09/20/2016 12:00am to 09/20/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	2,760 Impressions	\$19.96 USD

Total

\$19.96 USD

#### Billing Activity

For advertising services provided from 09/19/2016 12:00am to 09/19/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	1,166 Impressions	\$6.33 USD

Total

\$6.33 USD

#### Billing Activity

For advertising services provided from 09/19/2016 12:00am to 09/19/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://ww...ast-track-classes-fall-2016">http://ww...ast-track-classes-fall-2016</a>	3 Impressions	\$0.03 USD

Total

\$0.03 USD

#### Billing Activity

For advertising services provided from 08/30/2016 12:00am to 08/30/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6050031822310	Post: /folsomlakecollege/pos...s/10154517957899974 to fans	1,147 Impressions	\$5.96 USD

Total

\$5.96 USD





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1048571185258073-2125294

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	09/30/2016 7:58am
Amount Billed	\$6.58 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 7076 - Reference Number AGJDHA6CN2
Status	Payment Completed

Billing Activity

For advertising services provided from 09/26/2016 12:00am to 09/26/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	148 Impressions	\$0.96 USD

Total

\$0.96 USD

Billing Activity

For advertising services provided from 09/25/2016 12:00am to 09/25/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	431 Impressions	\$1.95 USD

Total

\$1.95 USD

Billing Activity

For advertising services provided from 09/24/2016 12:00am to 09/24/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	176 Impressions	\$0.89 USD

Total

\$0.89 USD

Billing Activity

For advertising services provided from 09/23/2016 12:00am to 09/23/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	344 Impressions	\$1.89 USD

Total

\$1.89 USD



**Billing Activity**

For advertising services provided from 09/22/2016 12:00am to 09/22/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	123 Impressions	\$0.75 USD

Total \$0.75 USD

**Billing Activity**

For advertising services provided from 09/21/2016 12:00am to 09/21/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	11 Impressions	\$0.06 USD

Total \$0.06 USD

**Billing Activity**

For advertising services provided from 09/20/2016 12:00am to 09/20/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	7 Impressions	\$0.04 USD

Total \$0.04 USD

**Billing Activity**

For advertising services provided from 09/19/2016 12:00am to 09/19/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6051301927110	Promoting Website: <a href="http://www...ast-track-classes-fall-2016">http://www...ast-track-classes-fall-2016</a>	3 Impressions	\$0.04 USD

Total \$0.04 USD



# iContact®

Please make your payment to:

**iContact LLC**  
PO Box 418296  
Boston MA 02241-8296  
billing@icontact.com

Date of Issue: 10/01/2016

Due by: 10/01/2016

**Bill to:** Folsom Lake College  
10 College Parkway  
Folsom, California 95630

Invoice Number	New Charges	Credits Received	Total Due
6405653	\$25.60	\$25.60	\$0.00

Client	Description	Charge	Credit
Folsom Lake ...	iContact Monthly Subscription (Oct 1, 2016 - Oct 31, 2016) 2,500 Subscribers (2,500 Subscribers Plan)	\$25.60	
Folsom Lake ...	\$25.60 Payment via Visa xxxxxxxxxxxx7076, Authorization# 097244		\$25.60
<b>Total Due:</b>			<b>\$0.00</b>

This invoice was paid on 10/03/16. Thank you for your payment!

Thank you for being our client!  
iContact



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386066</b>	Purchase Order No. <b>B117465</b>
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**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
 (Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
<b>Facebook</b> #1060672824047914-20714493 8/31/16 10/16				<b>84.20</b>
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____			Total Amount or Estimate	\$ <b>84.20</b>
Program Name		Program/Grant Number		
Program Director/Coordinator Signature		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.

<b>2</b>	<b>GENFD</b>	<b>5890</b>	<b>11</b>	<b>FLCP PISO</b>	
PO Line #	Bus. Unit	Account	Fund	Org	
<b>67100</b>	<b>0000</b>	<b>2017</b>	<b>051C</b>		\$ <b>84.20</b>
Program	Sub-Class	BY	Proj/Grant	Amount	

**James Harman** 10/3/16  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

**Kathleen Kirklin** 10/3/16  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

PO Line #	Bus. Unit	Account	Fund	Org	
					\$
Program	Sub-Class	BY	Proj/Grant	Amount	

**ENTERED**  
**Bob Log**  
**11/1/17**

200 10/5/16





P.O. BOX 6343  
FARGO ND 58125-6343

ACCOUNT NUMBER 4246 0445 5574 3768  
STATEMENT DATE 09-22-2016  
AMOUNT DUE \$84.20  
NEW BALANCE \$84.20

PAYMENT DUE ON RECEIPT



000001765 01 AB 0.399 106481689264624 P  
FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

AMOUNT ENCLOSED  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEMS  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000008420 000008420

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY								
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	New Balance
Company Total	\$1,147.65	\$84.20	\$0.00	\$0.00	\$0.00	\$0.00	\$1,147.65	\$84.20

CORPORATE ACCOUNT ACTIVITY				
FOLSOM LAKE - GF 4246-0445-5574-3768				TOTAL CORPORATE ACTIVITY \$1,147.65 CR
Post Date	Tran Date	Reference Number	Transaction Description	Amount
08-23	08-23	74798266236000000000392	PAYMENT - THANK YOU 00000 C	357.94 PY
09-19	09-19	74798266263000000001594	PAYMENT - THANK YOU 00000 C	789.71 PY

NEW ACTIVITY					
JOANY HARMAN 4246-0400-1996-7076		CREDITS \$0.00	PURCHASES \$84.20	CASH ADV \$0.00	TOTAL ACTIVITY \$84.20
Post Date	Tran Date	Reference Number	Transaction Description	Amount	
09-01	08-31	24906416244029701990473	FACEBK 6VBULASCN2 650-6187714 CA	84.20	

<b>CUSTOMER SERVICE CALL</b>  800-344-5696	ACCOUNT NUMBER 4246-0445-5574-3768		ACCOUNT SUMMARY	
	STATEMENT DATE 09/22/16	DISPUTED AMOUNT .00	PREVIOUS BALANCE	1,147.65
SEND BILLING INQUIRIES TO: U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335	<b>AMOUNT DUE</b>  84.20		PURCHASES & OTHER CHARGES	84.20
			CASH ADVANCES	.00
			CASH ADVANCE FEES	.00
			LATE PAYMENT CHARGES	.00
			CREDITS	.00
		PAYMENTS	1,147.65	
		ACCOUNT BALANCE	84.20	





U.S. BANCORP SERVICE CENTER  
 P. O. Box 6343  
 Fargo, ND 58125-6343



DISTRICT OFFICE

**ACCOUNT NUMBER** 4246-0400-1996-7076  
**STATEMENT DATE** 09-22-16  
**TOTAL ACTIVITY** \$ 84.20

000023670 01 AT 0.399 106481689314627 P

JOANY HARMAN  
 FLC BSO GF  
 10 COLLEGE PKWY  
 FOLSOM CA 95630-6798

"MEMO STATEMENT ONLY"  
 DO NOT REMIT PAYMENT

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder: Joany Harman Date: 10/3/16 Approver: Kathleen Herblin Date: 10/3/16

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-01	08-31	FACEBK 6VBULASCN2 650-6187714 CA PUR ID: P1060672824047914 TAX: 0.00	24906416244029701990473	7311	84.20

Default Accounting Code:

CUSTOMER SERVICE CALL  <b>800-344-5696</b>	<b>ACCOUNT NUMBER</b> 4246-0400-1996-7076		<b>ACCOUNT SUMMARY</b>	
	<b>STATEMENT DATE</b> 09-22-16	<b>DISPUTED AMOUNT</b> \$ .00	PREVIOUS BALANCE	\$ .00
<b>SEND BILLING INQUIRIES TO:</b>  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	<b>AMOUNT DUE</b>  \$ 0.00  <b>DO NOT REMIT</b>		PURCHASES & OTHER CHARGES	\$84.20
			CASH ADVANCES	\$ .00
			CASH ADVANCE FEE	\$ .00
			CREDITS	\$ .00
			<b>TOTAL ACTIVITY</b>	<b>\$84.20</b>





Facebook, Inc.  
 1601 Willow Road  
 Menlo Park, CA 94025-1452  
 United States

Account: 4105408242920

Transaction #1060672824047914-2074993

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	08/31/2016 9:14am
Amount Billed	\$84.20 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 7076 - Reference Number 6VBULASCN2
Status	Payment Completed

Billing Activity

For advertising services provided from 08/29/2016 12:00am to 08/29/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6050031822310	Post: /folsomlakecollege/pos...s/10154517957899974 to fans	1,063 Impressions	\$4.04 USD

Total \$4.04 USD

Billing Activity

For advertising services provided from 08/20/2016 12:00am to 08/20/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6049268317910	Post: /folsomlakecollege/pos...4 to fans and their friends	254 Impressions	\$2.26 USD

Total \$2.26 USD

Billing Activity

For advertising services provided from 08/19/2016 12:00am to 08/19/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6049268317910	Post: /folsomlakecollege/pos...4 to fans and their friends	2 Impressions	\$0.02 USD

Total \$0.02 USD

Billing Activity

For advertising services provided from 08/19/2016 12:00am to 08/19/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6049268317910	Post: /folsomlakecollege/pos...4 to fans and their friends	2,451 Impressions	\$15.02 USD

Total \$15.02 USD



6048332590710	Post: /folsomlakecollege/pos...4 to fans and their friends	1,795 Impressions	\$10.38 USD
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Total

\$10.38 USD

**Billing Activity**

For advertising services provided from 08/02/2016 12:00am to 08/02/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6048332590710	Post: /folsomlakecollege/pos...4 to fans and their friends	1,324 Impressions	\$7.22 USD

Total

\$7.22 USD

**Billing Activity**

For advertising services provided from 08/02/2016 12:00am to 08/02/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6048332590710	Post: /folsomlakecollege/pos...4 to fans and their friends	1 Impression	\$0.01 USD

Total

\$0.01 USD

**Billing Activity**

For advertising services provided from 08/01/2016 12:00am to 08/01/2016 1:30pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	262 Impressions	\$1.60 USD

Total

\$1.60 USD

**Billing Activity**

For advertising services provided from 07/31/2016 12:00am to 07/31/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	813 Impressions	\$4.16 USD

Total

\$4.16 USD

**Billing Activity**

For advertising services provided from 07/30/2016 12:00am to 07/30/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	638 Impressions	\$4.44 USD

Total

\$4.44 USD



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386062</b>	Purchase Order No. <b>B117465</b>
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**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No, Credit Memo No., or Packing Slip No. Date Items Received  
 (Please check if attached and write total dollar amount below)

*lw*

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
2 Facebook #824970090951527-2023179 7/31/16 <i>Satellite Fiber 8/31/16</i>				19.80
1 Cookie Connection #20 8/3/16				519.50
1 Lee's Feed. 8/3/16				170.42
1 GetClicky.com 8/7/16 ✓				79.99
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ <b>789.71</b>
Program Director/Coordinator Signature _____		Program Name _____	For grants/special projects _____	
Program Goal/Objective Number/Explanation _____		Program/Grant Number _____		

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.

*Jany Armas 8/30/16*  
 AUTHORIZED PURCHASER SIGNATURE \_\_\_\_\_ Date  
 (must be listed on Purchase Order)

*Athleen Kukler 8/31/16*  
 APPROVED: \_\_\_\_\_ Date  
 SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE

1	GENFD	5890	11	FL VA BSOF	Org
PO Line #	Bus. Unit	Account	Fund		Amount
67700	00000	2017	041X		\$ 769.91
Program	Sub-Class	BY	Proj/Grant		
2	GENFD	5890	11	FL OP PISO	Org
PO Line #	Bus. Unit	Account	Fund		Amount
67100	00000	2017	051C		\$ 19.80
Program	Sub-Class	BY	Proj/Grant		

**PAID**  
 9/1/16  
 94-736394

**ENTERED**  
*ves*  
 11/1/17





U.S. BANCORP SERVICE CENTER  
 P. O. Box 6343  
 Fargo, ND 58125-6343



DISTRICT OFFICE

**ACCOUNT NUMBER** 4246-0400-1996-7076  
**STATEMENT DATE** 08-22-16  
**TOTAL ACTIVITY** \$ 789.71

000028021 01 AT 0.399 106481647455396 P

JOANY HARMAN  
 FLC BSO GF  
 10 COLLEGE PKWY  
 FOLSOM CA 95630-6798

"MEMO STATEMENT ONLY"  
 DO NOT REMIT PAYMENT

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder: Joany Harman Date: 8/30/16 Approver: Kathleen Hecker Date: 8/31/16

**NEW ACCOUNT ACTIVITY**

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-01	07-31	FACEBK TBEEH8ADN2 650-6187714 CA PUR ID: P824970090951527 TAX: 0.00	24906416213028684146167	7311	19.80
08-04	08-03	SQ *COOKIE CONNECTION ACC GOSQ.COM CA PUR ID: 0001152921507342717764 TAX: 0.00	24692166216000681438588	5999	519.50
08-05	08-03	LEES FEED SHINGLE SPRG SHINGLE SPRIN CA PUR ID: 045736 TAX: 0.00	24692166217000075331463	5995	170.42
08-09	08-07	GETCLICKY COM 503-9080059 OR PUR ID: 20105896760 TAX: 0.00	24019516221088500676798	5999	79.99

**Default Accounting Code:**

<b>CUSTOMER SERVICE CALL</b>  <b>800-344-5696</b>	<b>ACCOUNT NUMBER</b> 4246-0400-1996-7076		<b>ACCOUNT SUMMARY</b>	
	<b>STATEMENT DATE</b> 08-22-16	<b>DISPUTED AMOUNT</b> \$ .00	<b>PREVIOUS BALANCE</b>	\$ .00
		<b>PURCHASES &amp; OTHER CHARGES</b>	\$789.71	
		<b>CASH ADVANCES</b>	\$ .00	
		<b>CASH ADVANCE FEE</b>	\$ .00	
		<b>CREDITS</b>	\$ .00	
		<b>TOTAL ACTIVITY</b>	\$789.71	
<b>SEND BILLING INQUIRIES TO:</b>  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335		<b>AMOUNT DUE</b> \$ 0.00  <b>DO NOT REMIT</b>		





P.O. BOX 6343  
FARGO ND 58125-6343

**ACCOUNT NUMBER** 4246 0445 5574 3768  
**STATEMENT DATE** 08-22-2016  
**AMOUNT DUE** \$1,147.65  
**NEW BALANCE** \$1,147.65  
PAYMENT DUE ON RECEIPT



000001939 01 AB 0.399 106481647349880 P

FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

**AMOUNT ENCLOSED**  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEM  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000114765 000114765

Please tear payment coupon at perforation.

**CORPORATE ACCOUNT SUMMARY**

FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash + Advances	Cash Advance + Fees	Late Payment + Charges	- Credits	- Payments	New = Balance
Company Total	\$1,663.22	\$789.71	\$0.00	\$0.00	\$0.00	\$0.00	\$1,305.28	\$1,147.65

**CORPORATE ACCOUNT ACTIVITY**

FOLSOM LAKE - GF 4246-0445-5574-3768				TOTAL CORPORATE ACTIVITY
				\$1,305.28 CR
Post Date	Tran Date	Reference Number	Transaction Description	Amount
08-03	08-03	7479826621600000000099	PAYMENT - THANK YOU 00000 C	1,305.28 PY

**NEW ACTIVITY**

JOANY HARMAN 4246-0400-1996-7076		CREDITS	PURCHASES	CASH ADV	TOTAL ACTIVITY
		\$0.00	\$789.71	\$0.00	\$789.71
Post Date	Tran Date	Reference Number	Transaction Description	Amount	
08-01	07-31	24906416213028684146167	FACEBK TBEEH8ADN2 650-6187714 CA	19.80	
08-04	08-03	24692166216000681438588	SQ *COOKIE CONNECTION ACC GOSQ.COM CA	519.50	
08-05	08-03	24692166217000075331463	LEES FEED SHINGLE SPRG SHINGLE SPRIN CA	170.42	
08-09	08-07	24019516221088500676798	GETCLICKY COM 503-9080059 OR	79.99	

CUSTOMER SERVICE CALL  800-344-5696	ACCOUNT NUMBER		ACCOUNT SUMMARY		
	4246-0445-5574-3768		PREVIOUS BALANCE	1,663.22	
		STATEMENT DATE	DISPUTED AMOUNT	PURCHASES & OTHER CHARGES	789.71
		08/22/16	.00	CASH ADVANCES	.00
				CASH ADVANCE FEES	.00
				LATE PAYMENT CHARGES	.00
				CREDITS	.00
				PAYMENTS	1,305.28
SEND BILLING INQUIRIES TO: U.S. Bank National Association C/O U.S. Bancorp Purchasing Card Program P.O. Box 6335 Fargo, ND 58125-6335		<b>AMOUNT DUE</b>		ACCOUNT BALANCE	1,147.65
		1,147.65			



US BANK 5117465  
BOR 386062



Facebook, Inc.  
1601 Willow Road  
Menlo Park, CA 94025-1452  
United States

Account: 4105408242920

Transaction #824970090951527-2023179

Description	Facebook Ads Payment
Account	4105408242920
Transaction Date	07/31/2016 6:29am
Amount Billed	\$19.80 USD
Billing Reason	Remaining ad costs at the end of the month.
Method	VISA xxxx xxxx xxxx 7076 - Reference Number TBEEH8ADN2
Status	Payment Completed

Billing Activity

For advertising services provided from 07/29/2016 12:00am to 07/29/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	714 Impressions	\$4.20 USD

Total

\$4.20 USD

Billing Activity

For advertising services provided from 07/28/2016 12:00am to 07/28/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	1 Impression	\$0.01 USD

Total

\$0.01 USD

Billing Activity

For advertising services provided from 07/28/2016 12:00am to 07/28/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	846 Impressions	\$4.22 USD

Total

\$4.22 USD

Billing Activity

For advertising services provided from 07/27/2016 12:00am to 07/27/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	939 Impressions	\$4.36 USD

Total

\$4.36 USD



Billing Activity

For advertising services provided from 07/27/2016 12:00am to 07/27/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	1 Impression	\$0.01 USD

Total

\$0.01 USD

Billing Activity

For advertising services provided from 07/26/2016 12:00am to 07/26/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	1,026 Impressions	\$4.55 USD

Total

\$4.55 USD

Billing Activity

For advertising services provided from 07/25/2016 12:00am to 07/25/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	1 Impression	\$0.02 USD

Total

\$0.02 USD

Billing Activity

For advertising services provided from 07/25/2016 12:00am to 07/25/2016 11:59pm

Ad ID	Ad Name	Details	Amount
6047899913310	Post: /folsomlakecollege/pos...4 to fans and their friends	446 Impressions	\$2.43 USD

Total

\$2.43 USD



**Harman, Joany**

---

**From:** Cookie Connection Acc Rec <invoicing@messaging.squareup.com>  
**Sent:** Wednesday, August 03, 2016 9:40 AM  
**To:** Harman, Joany  
**Subject:** Invoice Paid: #000020 from Cookie Connection Acc Rec



## Invoice Paid

Paid \$519.50 on Aug 3, 2016

---

### Folsom Lake College

Invoice #000020

August 3, 2016

### Customer

Joany Harman

harmanj@flc.losrios.edu

---

We appreciate your business.

---

Custom Dozen x 29	\$507.50
Custom Delivery	\$12.00
<b>Sub-Total</b>	<b>\$519.50</b>

---

<b>Total Paid</b>	<b>\$519.50</b>
VISA 7076	08/03/16, 9:40 AM



Vendor Code

Approved by / Date

Reviewed by / Date

Dispatched Method / Date

DATE 8/2/16 VENDOR Cookie Connection P.O. No. 10117465

ADDRESS 3992 Douglas Blvd

CITY Roseville STATE Ca ZIP 95661

E-MAIL Anita@CookieConnection.com

PHONE 916-9789-7727 FAX

DELIVERY INSTRUCTIONS  
FOR 386062

Department Building Location

College/District Location Department

Division Date Required

ITEM	DESCRIPTION	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>Snickerdoodle Cookies</u>	<u>29 doz</u>		<u>17.50</u>	<u>507.50</u>
2	<u>Center for Excellence</u>				
3	<u>Open house Fall 2016</u>				
4					
5					
6					
7	<u>CALCard</u>				
8	<u>Last 4: 7076</u>				
9	<u>Order #: #20</u>				
10	<u>Order Date: 8/3/16</u>				
11	<u>Delivery</u>				<u>12.00</u>
12					
13					

**Purchases Charged to Categorical Programs, Grants or Special Projects**

This purchase is in compliance with the requirements of \_\_\_\_\_

Program Director/Coordinator Signature: [Signature] For grants/special projects \_\_\_\_\_

Program Name: DSPS / EOPS

Project/Grant Number: 428A + 408B

Program Goal/Objective Number/Explanation: Serv. to students with disability +

Tax

Total: 519.50

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: [Signature] TYPED/PRINT: A.B. GMSW DATE: 8.2.16

REQUESTED BY: [Signature] SIGNATURE: \_\_\_\_\_ DATE: 8.2.16

AUTHORIZED: \_\_\_\_\_ DEAN OR AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

<u>Grnd/5200/12/FL.VS.DSPS</u>				
Bus. Unit	Account	* Fund	Org	Amount
<u>64300</u>	<u>00000</u>	<u>2016</u>	<u>428A</u>	<u>\$ 259.25</u>
Program	Sub-Class	BY	Proj/Grnt	Amount
<u>Grnd/5200/12/FL.VS.EOPS</u>				
Bus. Unit	Account	* Fund	Org	Amount
<u>64300</u>	<u>00000</u>	<u>2017</u>	<u>408B</u>	<u>\$ 259.25</u>
Program	Sub-Class	BY	Proj/Grnt	Amount



Clerk: MANDY                      Cashier: MANDY  
 Receipt #: 80664                  Store: 001

8/3/2016 8:32:27 AM 0:04:27

Bill To: folsom lake college FLC  
 10 College Parkway, Folsom, CA 95630

ITEM#	ORIG QTY	PRICE	EXT PRICE
93	9.99 12	9.49	113.88
BEDDING STRAW		WHEAT STRAW CA	
		Disc: \$6.00	Disc: 5%
	12.000 Unit(s)	Subtotal:	113.88
ELDORADO		7.5 % Tax:	8.541
		Shipping:	48.00
		<b>RECEIPT TOTAL:</b>	<b>170.42</b>

Tendered: 170.42

Credit Card: VISA \$170.42

Auth# 045736 \*\*\*\*\*7076

JOANY

DELIVER 8/16 AM

Our Return Policy:

Returns within 30 days  
 accompanied with a receipt will be  
 returned in the manner payment was  
 received.

No returns on clearance or  
 discounted items.

Checks maybe subjected to a 15  
 day waiting period.

Returns without a receipt will be  
 issued a store credit at the lowest  
 sold price.

Thank You for shopping at Lees' Feed.

8/3/2016 8:34:05 AM



VENDOR NAME AND ADDRESS:  
 Lee's Feed  
 4110 Mother Lode Drive  
 Shingle Springs CA 95682  
 530/677-4891

DELIVERY INSTRUCTIONS:  Deliver to Address Below  
 (Check one)  Will Call  
 Folsom Lake College  
 Receiving  
 10 College Parkway  
 Folsom CA 95630

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	Bedding Straw-wheat	12	EA	000093	9.99	<del>119.88</del>
2						113.88
3						
4						
5	Note: Delivery Date					
6	Scheduled for			Delivery		48.00
7	August 16, 2016					
8	<b>CALCard</b> last 4: 2076					
9	Order #: _____ Order Date: 8/3/16					
10						

**Purchases Charged to Categorical Programs, Grants or Special Projects**  
 This purchased is in compliance with the requirements of:  
 \_\_\_\_\_ Program Name Lottery  
 \_\_\_\_\_ For grants/special projects 700P  
 \_\_\_\_\_ Project/Grant Number  
 \_\_\_\_\_ Program Goal/Objective Number/Explanation Eligible Instructional Supplies

SUB-TOTAL	
SALES TAX	8.99
<b>TOTAL</b> (Not to Exceed \$200.00)	<del>176.87</del>

**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.

use tax 170.42  
 .57

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 170.99

REQUESTED BY: Linda Meroux TYPED/PRINT DATE 7-27-16

Bus. Unit Account Fund Org Gen Fd 4300 12 FL.VI.B10L

REQUESTED BY: Linda Meroux SIGNATURE DATE 7-27-16

Program Sub-Class BY Proj/Grnt Amount 04000,00000,2017 700P \$176.87

APPROVED: \_\_\_\_\_ DEAN OR OTHER AUTHORIZED SIGNATURE DATE 7/27/16

Bus. Unit Account Fund Ora



**From:** Auto-Receipt [<mailto:noreply@mail.authorize.net>]  
**Sent:** Sunday, August 07, 2016 2:01 AM  
**To:** Battershell, Matthew <[BatterM@flc.losrios.edu](mailto:BatterM@flc.losrios.edu)>  
**Subject:** Transaction Receipt from Roxr Software Ltd for \$79.99 (USD)

Note: This payment is for Clicky Web Analytics ([clicky.com](http://clicky.com)).

#### Order Information

Description: Goods or Services

Customer ID 138337

#### Billing Information

JOANY HARMAN  
FOLSOM LAKE COLLEGE  
10 COLLEGE PARKWAY  
FOLSOM, CA 95630  
UM  
[batterm@flc.losrios.edu](mailto:batterm@flc.losrios.edu)

#### Shipping Information

**Total: \$79.99 (USD)**

#### Payment Information

Date/Time: 7-Aug-2016 2:00:52 PDT  
Transaction ID: 20105896760  
Payment Method: Visa xxxx7076  
Transaction Type: Purchase  
Auth Code: 007357

#### Merchant Contact Information

Roxr Software Ltd  
MILWAUKIE, OR 97222  
US  
[no-reply@getclicky.com](mailto:no-reply@getclicky.com)

Note: This payment is for Clicky Web Analytics ([clicky.com](http://clicky.com)).



To: Battershell, Matthew <[BatterM@flc.losrios.edu](mailto:BatterM@flc.losrios.edu)>

Subject: Transaction Receipt from Roxr Software Ltd for \$79.99 (USD)

Note: This payment is for Clicky Web Analytics (clicky.com).

#### Order Information

Description: Goods or Services

Customer ID 138337

#### Billing Information

JOANY HARMAN  
FOLSOM LAKE COLLEGE  
10 COLLEGE PARKWAY  
FOLSOM, CA 95630  
UM

[batterm@flc.losrios.edu](mailto:batterm@flc.losrios.edu)

#### Shipping Information

**Total: \$79.99 (USD)**

#### Payment Information

Date/Time: 7-Aug-2016 2:00:52 PDT

Transaction ID: 20105896760

Payment Method: Visa xxxx7076

Transaction Type: Purchase

Auth Code: 007357

#### Merchant Contact Information

Roxr Software Ltd  
MILWAUKIE, OR 97222  
US

[no-reply@getclicky.com](mailto:no-reply@getclicky.com)

Note: This payment is for Clicky Web Analytics (clicky.com).



VENDOR NAME AND ADDRESS:

Roxr Software Ltd  
 Milwaukie, OR 97222  
 support@getclucky.com

DELIVERY INSTRUCTIONS:

- Deliver to Address Below  
 Will Call

(Check one)

ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	Yearly auto renewal fee for					79.99
2	Clicky Web Analytics					
3	software					
4	(receipt attached)					
5						
6	Send to Joany Harman					
7	for processing - paid					
8	using college credit card					
9						
10						

**Purchases Charged to Categorical Programs, Grants or Special Projects**

This purchased is in compliance with the requirements of:

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

SUB-TOTAL

79.99

SALES TAX

0

TOTAL

(Not to Exceed \$200.00)

79.99

**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.

REQUESTED BY: Kristy Hart DATE: 9/6/16  
 TYPED/PRINT  
 REQUESTED BY: Kristy Hart DATE: 9/6/16  
 SIGNATURE  
 APPROVED: Rachel Rosenthal DATE: 9/7/16  
 DEAN OR OTHER AUTHORIZED SIGNATURE

Received by

Date

GENFD 5600 / 11 / FL CP PISO

Bus. Unit Account Fund Org

60100 0000 2017 041A \$ 79.99

Program Sub-Class BY Proj/Grnt Amount

Bus. Unit Account Fund Org



**BLANKET ORDER RELEASE FORM**

ARC  DO   
 CRC  FM   
 FLC  ETW   
 SCC  OTHER \_\_\_\_\_

Release No. <b>386058</b>	Purchase Order No. <b>B117465</b>
------------------------------	--------------------------------------

**US BANK**

**SEE INSTRUCTIONS ON REVERSE SIDE  
 FOR COMPLETING THIS FORM**

Vendor Name (As it appears on Purchase Order) Vendor Code

Invoice No., Credit Memo No., or Packing Slip No. Date Items Received  
 (Please check if attached and write total dollar amount below)

DESCRIPTION (Do Not Complete if Attaching Invoice Credit Memo or Packing Slip)	QUANTITY	UNIT	UNIT PRICE	TOTAL
National Seminars T101641 purchase # 400430118 7/8/16	1	EA	199.00	199.00
Mailers USA R821578 Order # 56998 7/8/16	1	EA	158.94	
use tax	1	EA	12.72	
				171.66
Purchases Charged to Categorical Programs, Grants or Special Projects This purchase is in compliance with the requirements of _____				Total Amount or Estimate \$ <b>370.66</b>
Program Director/Coordinator Signature _____		Program Name _____	Program/Grant Number _____	
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.

1	GENED	5890	11	FL-VA	BSOP
PO Line #	Bus. Unit	Account	Fund	Org	
67200	0000	2017	041X		\$ 370.66
Program	Sub-Class	BY	Proj/Grant	Amount	

PO Line #	Bus. Unit	Account	Fund	Org	
					\$
Program	Sub-Class	BY	Proj/Grant	Amount	

*Jessie Harmon* 7/25/16  
 AUTHORIZED PURCHASER SIGNATURE Date  
 (must be listed on Purchase Order)

*Kathleen Kerkela* 8/1/16  
 APPROVED: SUPERVISOR, DEAN OR OTHER AUTHORIZED SIGNATURE Date

**ENTERED**  
 8 of 109  
 1/11/17

2-DO 8/11/16



P.O. BOX 6343  
FARGO ND 58125-6343



**ACCOUNT NUMBER** 4246 0445 5574 3768  
**STATEMENT DATE** 07-22-2016  
**AMOUNT DUE** \$1,663.22  
**NEW BALANCE** \$1,663.22  
 PAYMENT DUE ON RECEIPT

000001940 01 AB 0.399 106481607256018 P

FOLSOM LAKE - GF  
ATTN JOANY HARMAN  
10 COLLEGE PKWY  
FOLSOM CA 95630-6798

**AMOUNT ENCLOSED**  
\$

Please make check payable to "U.S. Bank"

U.S. BANK CORPORATE PAYMENT SYSTEMS  
P.O. BOX 790428  
ST. LOUIS, MO 63179-0428

4246044555743768 000166322 000166322

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY									
FOLSOM LAKE - GF 4246 0445 5574 3768	Previous Balance	Purchases And Other + Charges	Cash Advances +	Cash Advance Fees +	Late Payment Charges	- Credits	- Payments	New = Balance	
Company Total	\$1,305.28	\$357.94	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,663.22	

NEW ACTIVITY				
JOANY HARMAN 4246-0400-1996-7076	CREDITS	PURCHASES	CASH ADV	TOTAL ACTIVITY
	\$0.00	\$357.94	\$0.00	\$357.94
Post Date	Tran Date	Reference Number	Transaction Description	Amount
07-11	07-08	24270746191468800003617	NATL/PADGET 8006825061 913-4327755 KS	199.00
07-11	07-08	24275396191410300635257	MAILERS USA 425-2024008 WA	158.94

Department: 00000 Total: \$357.94  
Division: 00000 Total: \$357.94

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER		ACCOUNT SUMMARY	
		4246-0445-5574-3768		PREVIOUS BALANCE
	STATEMENT DATE	DISPUTED AMOUNT	PURCHASES & OTHER CHARGES	357.94
	07/22/16	.00	CASH ADVANCES	.00
			CASH ADVANCE FEES	.00
			LATE PAYMENT CHARGES	.00
			CREDITS	.00
			PAYMENTS	.00
			ACCOUNT BALANCE	1,663.22

SEND BILLING INQUIRIES TO:  
U.S. Bank National Association  
C/O U.S. Bancorp Purchasing Card Program  
P.O. Box 6335  
Fargo, ND 58125-6335

**AMOUNT DUE**

**1,663.22**





U.S. BANCORP SERVICE CENTER  
 P. O. Box 6343  
 Fargo, ND 58125-6343

DISTRICT OFFICE

**ACCOUNT NUMBER** 4246-0400-1996-7076  
**STATEMENT DATE** 07-22-16  
**TOTAL ACTIVITY** \$ 357.94

"MEMO STATEMENT ONLY"  
 DO NOT REMIT PAYMENT

000021563 01 AT 0.399 106481607323188 P

JOANY HARMAN  
 FLC BSO GF  
 10 COLLEGE PKWY  
 FOLSOM CA 95630-6798

We certify that all purchases listed on this statement, unless annotated to the contrary, are true, correct and for official business only. Payment is authorized.

Cardholder: Joany Harman Date: 8/1/16 Approver: Kathleen Kubler Date: 8/1/16

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-11	07-08	NATL/PADGET 8006825061 913-4327755 KS PUR ID: 460430118004000 TAX: 0.00	24270746191468800003617	8249	199.00
07-11	07-08	MAILERS USA 425-2024008 WA PUR ID: 20039423933 TAX: 0.00	24275396191410300635257	5085	158.94

Default Accounting Code:

CUSTOMER SERVICE CALL  <b>800-344-5696</b>	<b>ACCOUNT NUMBER</b> 4246-0400-1996-7076		<b>ACCOUNT SUMMARY</b>	
	<b>STATEMENT DATE</b> 07-22-16	<b>DISPUTED AMOUNT</b> \$ .00	PREVIOUS BALANCE \$ .00	
<b>SEND BILLING INQUIRIES TO:</b>  C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	<b>AMOUNT DUE</b> \$ 0.00  <b>DO NOT REMIT</b>		PURCHASES & OTHER CHARGES \$357.94	
			CASH ADVANCES \$ .00	
			CASH ADVANCE FEE \$ .00	
			CREDITS \$ .00	
		<b>TOTAL ACTIVITY</b>		<b>\$357.94</b>



# LOS RIOS COMMUNITY COLLEGE DISTRICT TRAVEL AUTHORIZATION AND REIMBURSEMENT CLAIM

(Note: Read instructions on back of set before completing)

Please check box where payment is to be sent:

ARC  FLC  D.O.  EWC  T- 101641  
 CRC  SCC  FM

Employee Name Joany Harman ID # 0010888

Conference Sponsor National Seminars  
Name of Organization

Conference/Activity Star 12 Pass - 1 Year

Destination Online Webinars/In person

Budget No. 1: GENFD / 5200 / 11 / FLVA SIAF / 67500 / 0000 / 101L Seminars  
BusUnit Acct Fund Org Pgm Code SubClass Proj/Grant

Budget No. 2: \_\_\_\_\_  
BusUnit Acct Fund Org Pgm Code SubClass Proj/Grant

## PART I - Request to Attend

Inclusive dates of travel:  
From 8/1/16 / \_\_\_\_\_ to 8/30/17 / \_\_\_\_\_  
Date Time Date Time

Estimated Expenses: \*Indicates Receipt Required for Reimbursement  
 A. Transportation (Estimate cost of air fare) \$ \_\_\_\_\_  
 Air\*  Dist. Vehicle  Priv. Vehicle \_\_\_\_\_ miles X \_\_\_\_\_ c/mile  
 Travel Agency (Air fare) \_\_\_\_\_

The undersigned certifies that the vehicle he/she uses for Los Rios Community College District business carries the legal minimum insurance required by law.

B. Lodging\* \$ \_\_\_\_\_  
Name of Hotel/Motel \_\_\_\_\_  
\_\_\_\_\_ days @ \$ \_\_\_\_\_ day

C. Registration/Conference Fee\* (check one) \$ 199.00  
 incl. certain meal(s)  excl. meal(s)

D. Meals..... \$ \_\_\_\_\_  
 Breakfast \$ \_\_\_\_\_ x \_\_\_\_\_ Lunch \$ \_\_\_\_\_ x \_\_\_\_\_ Dinner \$ \_\_\_\_\_ x \_\_\_\_\_  
 # of days # of days # of days

E. Other (describe)\* \$ \_\_\_\_\_  
(Admin. Approval required for vehicle rental)

F. Incidental Expenses \$ \_\_\_\_\_

**Total Estimated Expenses** \$ 199.00  
**Maximum Allowance, if applicable** \$ \_\_\_\_\_

**Travel charged to Categorical Programs, Grants or Special Projects:**  
 This travel is in compliance with the requirements of: Last 4: 2076

Program Name Order #: 44043018 Order Date: 7/1/16  
 Program Director/Coordinator Signature

For grants/special projects: \_\_\_\_\_ Project/Grant Number \_\_\_\_\_  
 Program Goal/Objective Number/Explanation \_\_\_\_\_

Approval \_\_\_\_\_ Date 7/7/16  
Employee \_\_\_\_\_  
 Approval \_\_\_\_\_ Date \_\_\_\_\_  
Area Dean/Supervisor \_\_\_\_\_  
 Approval \_\_\_\_\_ Date 7/8/16  
Vice President, Administration \_\_\_\_\_  
 Approval \_\_\_\_\_ Date \_\_\_\_\_  
President/Designee/or Chancellor \_\_\_\_\_

## PART II - Request for Cash Advance/Prepaid Expense

(To be completed by Requestor)

A. Employee Cash Advance GENFD / 9161 / 11 \$ \_\_\_\_\_  
 BusUnit Acct Fund

B. Registration (Payee) US BANK \$ 199.00  
 Registration Due Date \_\_\_\_\_ Vendor I.D. \_\_\_\_\_

Budget No. 1: \$ \_\_\_\_\_ Amount Budget No. 2: \$ \_\_\_\_\_ Amount

Approval \_\_\_\_\_  
 Vice President, Administration

## PART III - Request for Reimbursement

To be completed no later than 3 days after return from authorized travel.  
 \* Indicates original receipts required - enter all claimable costs incurred, including prepaid amounts.

From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_  
 Date Time Date Time

A. Transportation \$ \_\_\_\_\_  
 Air fare\*  Bus\*  Other\*  
 Prepaid to travel agency by district  
 Private Vehicle \_\_\_\_\_ miles X \_\_\_\_\_ c/mile \$ \_\_\_\_\_

B. Lodging\* \$ \_\_\_\_\_  
 (Single occupancy rate only/exclude phone calls & other costs)

C. Registration Fee (check one) \$ \_\_\_\_\_  
 (Enter full cost even if prepaid)  
 Prepaid by DO/College  No Prepayment  
 (No receipt required if prepaid)

D. Meals (Enter actual expenses not to exceed meal allowance stated per Regulation 8341.)

Date	Breakfast	Lunch	Dinner	Total

**Total Meals** \$ \_\_\_\_\_

E. Other Expenses\* \$ \_\_\_\_\_  
 (Parking fees, bridge toll, business phone call, Wi-Fi, and other business related expenses)  
 (Admin. approval required for vehicle rental)

F. Incidental Expenses - not to exceed \$5/day \$ \_\_\_\_\_  
 (Tips, personal phone call, and other misc. travel expenses)

G. Total Expenses (A - F) \$ \_\_\_\_\_

**Total Expenses (lesser of Max. Allowance or Total Expenses)** \$ \_\_\_\_\_  
**Less Amount(s) Prepaid** < \_\_\_\_\_ >  
**Subtotal** \_\_\_\_\_  
**Less Cash Advance (Part II)** < \_\_\_\_\_ >  
**Total Requested for Reimbursement** \$ \_\_\_\_\_

Certification/Approval  
 I certify that the above claim is an accurate accounting of expenses incurred which does not exceed the allowances provided per Regulation 8341, and complies with District insurance requirements.  
 \_\_\_\_\_ Date 7/8/16  
 Claimant's Signature

Approved \_\_\_\_\_ Date \_\_\_\_\_  
 Area Dean/Supervisor  
 Approved \_\_\_\_\_ Date 7/8/16  
 Vice President, Administration

## PART IV Vendor I.D.

Enter allocation of Subtotal (PART III.G.) above

Budget No. 1: \$ \_\_\_\_\_ Amount Budget No. 2: \$ \_\_\_\_\_ Amount

**D.O. Use:** GENFD / 9161 / 11 \$ \_\_\_\_\_  
 BusUnit Acct Fund Amount



From: a-nationalseminars@natsem.com  
Sent: Friday, July 08, 2016 6:42 AM  
To: Harman, Joany  
Subject: Your STAR12® Order Confirmation

National  
Seminars



Order Confirmation

Thank you for your order, Joany!

Name: Joany Harman  
Email: [HARMANJ@FLC.LOSRIOS.EDU](mailto:HARMANJ@FLC.LOSRIOS.EDU)  
Confirmation Number: 460430118  
Date of Purchase: 07/08/2016



Order Details:

STAR12® Pass

FAQs

Instructions on accessing STAR12® will be sent to the following e-mail address(es):

Contact Us

Joany Harman | [HARMANJ@FLC.LOSRIOS.EDU](mailto:HARMANJ@FLC.LOSRIOS.EDU) | Pass Type: All Access-Renewal

Order Summary

Title	Type	Qty	Price
Star12 Renewal	Star12 Renewal	1	\$ 199.00

Subtotal: \$ 199.00

Shipping: \$ .00

Taxes: \$ .00

Total: \$ 199.00

\*Prices reflect discount taken at checkout.

Billing Address:  
BUSINESS SERVICES  
10 COLLEGE PARKWAY  
FOLSOM, CA. 95630

Status:  
payment pending



# Los Rios Community College District Requisition

Page \_\_\_\_\_ of \_\_\_\_\_

Req. No. **821578**

P.O. No. **CALCARD**

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

DATE **7/5/16** VENDOR **MAILERS USA**  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 E-MAIL **Website: WWW.mailersusa.com**  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_

DELIVERY INSTRUCTIONS	
<b>04ASPH</b>	
Department Building Location	
<b>FLC</b>	<b>HR</b>
College/District Location	Department
<b>Student Svcs.</b>	<b>8/15/16</b>
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	<b>Paperboard Mailer #2 (7"x9")</b>	<del>100</del>	<b>case</b>	<b>26.49</b>	<b>158.94</b>
2	<b>White</b>				
3	<b>(Free Shipping)</b>				
4					
5					
6					
7					
8					
9					
10	<b>CALCard</b> Last 4: <b>2026</b>				
11	<b>Order #: 56998</b> Order Date: <b>7/8/16</b>				
12					
13					

<b>Purchases Charged to Categorical Programs, Grants or Special Projects</b>		<b>USE Tax</b>	<b>12.72</b>
This purchase is in compliance with the requirements of _____			
Program Name _____			
For grants/special projects _____			
Program Director/Coordinator Signature _____	Project/Grant Number _____	<b>Total</b>	<b>158.94</b>
Program Goal/Objective Number/Explanation _____			<b>171.66</b>

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: **CHRISTINE WICKER** TYPED/PRINT DATE **7/5/16**  
 REQUESTED BY: \_\_\_\_\_ SIGNATURE DATE **7/5/16**  
 AUTHORIZED: \_\_\_\_\_ DEAN OR AUTHORIZED SIGNATURE DATE **7/6/16**  
 APPROVED: \_\_\_\_\_ VICE PRESIDENT, ADMINISTRATION DATE **7/6/16**

<b>GENED 4500 / 11 / Flvs.encl 171.66</b>					
Bus. Unit	Account	* Fund	Org		
<b>62100</b>	<b>0000</b>	<b>7017</b>	<b>OSIC</b>	<b>\$</b>	<b>158.94</b>
Program	Sub-Class	BY	Proj/Grnt		Amount
Bus. Unit	Account	* Fund	Org		
				<b>\$</b>	
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**



# Harman, Joany

---

**From:** MailersUSA Sales <Support@MailersUSA.com>  
**Sent:** Friday, July 08, 2016 10:46 AM  
**To:** Harman, Joany  
**Subject:** MailersUSA: New Order # 56998



Hello Joany Harman,  
Thanks for your order! After your order ships, you will receive an email from UPS.com with tracking info. We recommend creating an account for future orders so you can reorder quicker and track all orders on our website. We look forward to providing your shipping & office supply needs. *Happy Mailing!*

Your Order #56998 (placed July 8, 2016 10:45:37 AM PDT)

**Billing Information:**

Joany Harman  
Folsom Lake College - GF  
10 College Parkway  
Folsom, California, 95630  
United States  
T: 916-608-6622  
F: 916-608-6553

**Shipping Information:**

Christine Wurzer  
RECEIVING - Folsom Lake College  
10 College Parkway  
Folsom, California, 95630  
United States  
T: 916-608-6645  
F: 916-608-6553  
[harmanj@flc.losrios.edu](mailto:harmanj@flc.losrios.edu)

**Payment Method:**

**Credit Card**

**Credit Card Type:** Visa  
**Credit Card Number:** xxxx-7076  
**Processed Amount:** \$158.94

**Shipping Method:**

UPS Ground, larger orders may go LTL  
- Free

Color	Item	Qty/Case	Sku	Qty	Subtotal
White	Paperboard Mailer #2 - 7 X 9	100	RPM2	6	\$158.94
Subtotal					\$158.94
Shipping & Handling					\$0.00