

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001097043

PURCHASING: (916) 568-3071 • FAX: (916) 568-3145
 ACCOUNTING OPS: (916) 568-3065 • FAX: (916) 286-3636

Date	Revision	Page
02/14/2018		1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
1010749 MITCHINERB SHEWMAKERN04	CYPH144 CTE	

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Supplier: 0000024414
 CIWEA
 TREASURER
 PO BOX 33831
 LONG BEACH CA 90832-3831

Phone: (714) 928-2330
Fax: (714) 459-7274

email: ciweaofficial@gmail.com

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

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

Tax Exempt? N

Line-Sch	Item/Description	Quantity UOM	PO Price	Extended Amt	Due Date
1- 1	MEMBERSHIP : CIWEA 2018 ORGANIZATIONAL MEMBERSHIPS FROM: JULY 1, 2017 - DECEMBER 31, 2018 FOR: FOLSOM LAKE COLLEGE CAREER CENTER WORK EXPERIENCE STAFF: JULIE COLLIER, CHARMAIGN LOMASTRO, KELLIE FUNDERBURG, ANNA DOMEK, AND JAISHA WHITE.	1.00 CHG	255.00	255.00	02/14/2018

PRE PAYMENT

RENEWAL FORM & INVOICE ATTACHED
 FOR: 3 RENEWING MEMBERSHIPS AND 2 NEW MEMBERSHIPS

TOTAL DUE FOR FLC ORGANIZATIONAL MEMBERSHIP = \$255

ATTACHED: 2017-2018 CIWEA MEMBERSHIP FORM MUST BE MAILED WITH PAYMENT

Sub Total Amount	255.00
Sales Tax Amount	0.00
Total PO Amount	255.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5300	12	FL.VI.VTEA	49320	00000	314D	255.00	2018

0001010749KIRKLINK13-FEB-2018

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.

LOS RIOS COMMUNITY COLLEGE DISTRICT

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

PURCHASE ORDER TERMS AND CONDITIONS

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

Requisition

Supplier: CIWEA 0000024414
 TREASURER
 PO BOX 33831
 LONG BEACH CA 90832-3831
 United States
Phone: (714) 928-2330 **Fax:** (714) 459-7274
email: ciweaofficial@gmail.com

Business Unit: GENFD OPEN	
Req ID: 0001010749	Date: 02/05/2018
Requisition Name: CIWEA MEMBERSHIP RENEWAL S18	
Requester: Brandi Mitchiner	Bldg#: CTE
Requester Signature	
Buyer: Nicholas Shewmaker	
Approved:	
Entered By: MITCHINB 05-FEB-2018	

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

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	JULY 1, 2017 - DECEMBER 31, 2018 CIWEA MEMBERSHIP: JULIE COLLIER, CHARMAIGN LOMASTRO, KELLIE FUNDERBURG, ANNA DOMEK, AND JAISHA WHITE.	1	CHG	255.00	255.00	02/24/2018

Total Requisition Amount: 255.00

<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	5300	12	FL.VI.VTEA	49320	00000	314D	255.00

Purchases Charged to Catagorical Programs, Grants or Special Project.

This purchase is in compliance with the requirement of VTEA

For grants/special projects 314D note: college membership

Objectives 3, 5, 9, 9

Name: Victoria Dept

Approval Signature 	Approval Signature 	Approval Signature
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Requisition

Supplier: CIWEA 0000024414
 TREASURER
 PO BOX 33831
 LONG BEACH CA 90832-3831
 United States
Phone: (714) 928-2330 **Fax:** (714) 459-7274
email: ciweaofficial@gmail.com

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

Business Unit: GENFD OPEN	
Req ID: 0001010749	Date: 02/05/2018
Page: 1	
Requisition Name: CIWEA MEMBERSHIP RENEWAL S18	
Requester: Brandi Mitchiner	Bldg#: CTE
Requester Signature	
Buyer: Nicholas Shewmaker	
Approved:	
Entered By: MITCHINB 05-FEB-2018	

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	MEMBERSHIP : CIWEA 2018 ORGANIZATIONAL MEMBERSHIPS FROM: JULY 1, 2017 - DECEMBER 31, 2018 FOR: FOLSOM LAKE COLLEGE CAREER CENTER WORK EXPERIENCE STAFF: JULIE COLLIER, CHARMAIGN LOMASTRO, KELLIE FUNDERBURG, ANNA DOMEK, AND JAISHA WHITE.	1	CHG	255.00	255.00	02/24/2018

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TOTAL DUE FOR FLC ORGANIZATIONAL MEMBERSHIP = \$255

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GENFD	5300	12	FL.VI.VTEA	49320	00000	314D	255.00

<p>Purchases Charged to Catagorical Programs, Grants or Special Project.</p> <p>This purchase is in compliance with the requirement of _____</p> <p>For grants/special projects _____</p> <p>_____</p> <p>Name: _____</p>
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Approval Signature	Approval Signature	Approval Signature
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2017-2018 CIWEA MEMBERSHIP FORM

Membership Year: July 1, 2017 – December 31, 2018

NOTE: CIWEA is changing Membership Cycle to Calendar Year

MEMBERSHIP AGREEMENT

Check one: Single Membership @ \$85.00 1 person Organization/Employer Membership* @ \$255
(*Complete additional form(s) to include names & contact information for those included in this Membership – No limit)

Check one: 2-Year College Employer 4-Year Public College/University 4-Year Private College/University
 Other: _____

By payment of annual membership fees, the individuals noted herein agree to receive and send information electronically, including but not limited to, meeting notices, ballots, and other information regarding the California Internship & Work Experience Association, via internet/email.

The CIWEA website can now list links to your campus to help connect Employers with you and your students - please provide the link to your website and the primary contact information for employers to use.

Website Link: www.flc.lostrios.edu

Phone Number: 916 608-6552 Email Address: CollieJ@flc.lostrios.edu

MEMBER

New: Renewing:

First Name: Julie Last Name: Collier

Title: Work Experience & Internship Coordinator

Office/Dept: Work Exp Program

College/University/Company: Folsom Lake College

Address: 10 College Parkway City: Folsom State: CA Zip: 95630

Email: _____ Phone: _____

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

MEMBER

New: Renewing:

First Name: Charmaygn Last Name: Lomastro

Title: Work Based Learning Specialist

Office/Dept: Work Exp + Internship Program

College/University/Company: Folsom Lake College

Address: 10 College Parkway City: Folsom State: CA Zip: 95630

Email: LomastC@flc.lostrios.edu Phone: 916 608-6979

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

METHOD OF PAYMENT – Check or Credit Card (Visa or MasterCard only)

Check: # _____ (Please enclose check with this completed form)

Credit Card: Visa MasterCard Card Number: _____ Exp Date: / /

Name on Card: _____

Mail payment to: CIWEA Treasurer, PO Box 33831, Long Beach, CA 90832

Questions? Email the Treasurer at: Treasurer@ciwea.org call Kathrene Hansen Kin at: 562-435-2025 (Work #)



2017-2018 CIWEA MEMBERSHIP FORM

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 Employer Other: _____

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Website Link: www.fic.losrios.edu

Phone Number: 916-609-6552 Email Address: CollieJ@fic.losrios.edu

MEMBER

New: Renewing:

First Name: Kellie Last Name: Funderburg

Title: Adjunct Professor

Office/Dept: Work Experience and Internship Program

College/University/Company: Folsom Lake College

Address: 10 College Parkway City: Folsom State: CA Zip: 95630

Email: FunderK@arl.losrios.edu Phone: 916-216-4945

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

MEMBER

New: Renewing:

First Name: Anna Last Name: Donek

Title: Adjunct Professor

Office/Dept: Work Experience and Internship Program

College/University/Company: Folsom Lake College

Address: 10 College Parkway City: Folsom State: CA Zip: 95630

Email: DoneKA@arl.losrios.edu Phone: 916-501-2033

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

METHOD OF PAYMENT – Check or Credit Card (Visa or MasterCard only)

Check: # _____ (Please enclose check with this completed form)

Credit Card: Visa MasterCard Card Number: _____ Exp Date: ___/___/___

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Website Link: WWW.FIC.LOSRIS.EDU

Phone Number: 916-608-6552 Email Address: CollieJ@Fic.LosRIS.edu

MEMBER

New: Renewing:

First Name: Jaiisha Last Name: White

Title: Adjunct Professor

Office/Dept: Work Experience and Internship Program

College/University/Company: Folsom Lake College

Address: 10 College Parkway City: Folsom State: CA Zip: 95630

Email: WhiteJ@Fic.LosRIS.edu Phone: 916-501-2033

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

MEMBER

New: Renewing:

First Name: _____ Last Name: _____

Title: _____

Office/Dept: _____

College/University/Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Optional

I am new to the field & would like to request a mentor I'm experienced & would like to volunteer as a Mentor

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