

**FOLSOM LAKE COLLEGE  
REVOLVING FUND ACCOUNT**

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

CHECK NO. **F- 01912**

DATE **9/25/2018**

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

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

TO **CPP INC.  
PO BOX 49156  
SAN JOSE, CA 95161 - 9156**

REQUISITIONED BY **LPO F. ESTOMO/DEGN**  
*3/18 13168 SH*

GENFD	5890	12	FL.VS.DSPS	64200	00000	2019	428A	\$195.00
BUS UNIT	ACCOUNT	FUND	DEPARTMENT (ORG)	PROGRAM	CLASS	BY	PROJECT/GRANT	AMOUNT

BUS UNIT	ACCOUNT	FUND	DEPARTMENT (ORG)	PROGRAM	CLASS	BY	PROJECT/GRANT	AMOUNT
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QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EST. TOTAL AMOUNT
1.00	EA	SKILLSONE SUBSCRIPTION FROM: <i>06/01/18 - 05/31/19</i> FOR FOLSOM LAKE COLLEGE - DSPS INVOICE# <i>666493 SH</i>	195.000	195.00

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

**FOLSOM LAKE COLLEGE**  
REVOLVING FUND ACCOUNT ULID 382004  
10 College Parkway • Folsom, CA 95630  
(916) 608-6549

JPMorgan Chase Bank, N.A.  
Sacramento, CA

CHECK No. **F- 01912**

September 25, 2018

DATE: \_\_\_\_\_ 90-7162  
3222

PAY TO THE ORDER OF

CPP INC. \*\*\*\*\*

\$ 195.00

One Hundred Ninety-Five and 00/100 \*\*\*\*\*

DOLLARS

\*VOID 6 MONTHS FROM DATE DRAWN

**NON-NEGOTIABLE**



The people development people.

CPP, Inc.
For Questions please contact us at: ar@cpp.com
Telephone: 800-624-1765
Fax: 650-969-8608
Federal ID: 94-1337736
www.cpp.com

BILL TO CUSTOMER NO: 453111
Folsom Lake Coll
DSPTS Program 10 College Pkwy
Folsom, CA 95630
United States
Contact: Tim McHargue

SHIP TO CUSTOMER NO: 453111
Folsom Lake Coll
DSPTS Program 10 College Pkwy
Folsom, CA 95630
United States
Contact:

Invoice

Payment Terms: Net 30 Days
Page: 1 of 1
Invoice Number: IN00666493
Invoice Date: 6/15/2018
Invoice Due Date: 7/15/2018
Order Number: SO-00527072
Customer PO:
Shipping Method: Via Internet
Carrier tracking number:
Currency: USD
Total Amount Due: \$195.00

NOTICE: CPP is shutting down SkillsOne® on May 31, 2019. If you renew your SkillsOne® subscription, please keep in mind that your account will end on May 31, 2019 regardless of any time left on it, unless you upgrade to Elevate® before then. No refunds will be offered, and your past reports could be lost if you do not upgrade before the shutdown, so please upgrade as soon as possible to begin taking advantage of the many benefits of Elevate. Go to www.skillsone.com, sign in, and then click on "Free Elevate Upgrade" for more information.

Table with 8 columns: Line, Item number, Description, Quantity, Unit, Unit price, Discount percent, Discount, Amount. Row 1: 1, 10212, SkillsOne® Renewal Fee, 1, EA, \$195.0000, 0, -, \$195.00. Includes subscription dates: 6/1/2018 to 5/31/2019.

REMIT TO:
CPP, Inc.
PO BOX 49156
SAN JOSE CA 95161-9156
USA

CUSTOMER NO: 453111
INVOICE NO: IN00666493

SUB TOTAL: \$ 195.00
TOTAL DISCOUNT: \$ 0.00
TAX TOTAL: \$ 0.00
FREIGHT AND OTHER CHARGES: \$ 0.00
PRE-PAYMENT -
TOTAL AMOUNT DUE: \$195.00



**LIMITED PURCHASE ORDER**  
(Not to Exceed \$200.00)

<p>VENDOR NAME AND ADDRESS:  <u>CPP.COM</u></p>	<p>DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call</p> <p style="font-size: 2em; color: red; text-align: center;"><u>REVL #L01912</u></p>
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ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	<u>SKILLS one RENEWAL fee</u>	<u>1</u>				<u>195.00</u>
2						
3						
4						
5						
6						
7						
8						
9						
10						

<p><b>Purchases Charged to Categorical Programs, Grants or Special Projects</b> This purchased is in compliance with the requirements of: <u>DSPS</u></p>	<p>SUB-TOTAL</p> <p>SALES TAX</p> <p><b>TOTAL</b> (Not to Exceed \$200.00)</p>	<p><u>195.00</u></p> <p><u>195.00</u></p>
<p>Program Name: <u>428A</u> For grants/special projects</p> <p>Program Director/Coord. Signature: <u>[Signature]</u> <u>SERVICES TO STUDENTS w/ DISABILITIES</u></p> <p>Project/Grant Number: <u>428A</u> Program Goal/Objective Number/Explanation:</p>		

**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.

<p>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.</p> <p><u>SHARRISSE ESTOMO</u> <u>9/25/18</u></p>	<p>Received by _____ Date _____</p> <p><u>GENFO</u> <u>5300</u> / <u>12</u> / <u>FL.VS.DSPS</u></p>
<p>REQUESTED BY: <u>[Signature]</u> TYPED/PRINT _____ DATE <u>9/25/18</u></p>	<p>Bus. Unit Account Fund Org</p> <p><u>64200</u> <u>00000</u> <u>2019</u> <u>428A</u> \$ <u>195.00</u></p>
<p>REQUESTED BY: <u>[Signature]</u> SIGNATURE _____ DATE <u>9/25/18</u></p>	<p>Program Sub-Class BY Proj/Grnt Amount</p>
<p>APPROVED: <u>[Signature]</u> DEAN OR OTHER AUTHORIZED SIGNATURE _____ DATE <u>9/25/18</u></p>	<p>Bus. Unit Account Fund Org</p>
<p>APPROVED: <u>[Signature]</u> VICE PRESIDENT ADMINISTRATION _____ DATE <u>9/25/18</u></p>	<p>Program Sub-Class BY Proj/Grnt Amount</p>