

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001105520

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

Date	Revision	Page
05/13/2019		1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Metho
Reference:	Location / Dept	
1019128 HARTK	04ADMN PIO	

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Supplier: 0000035178
 FAST SIGNS
 FAST SIGNS FOLSOM
 420 E BIDWELL STREET
 FOLSOM CA 95630

Phone: (916) 608-4455
Fax: (916) 608-8898

email: 457@fastsigns.com

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

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

Tax Exempt? N

Line-Sch	Item/Description	Quantity	UOM	PO Price	Extended Amt	Due Date
1- 1	CUSTOM CUT FALCON MASCOT (COROPLAST 4 MIL, 48" X 72", 1 SIDED)	3.00	EA	253.64	760.92	05/10/2019

PER ESTIMATE # FOL-26020

SEND CONFIRMING PO TO VENDOR: 457@FASTSIGNS.COM

Approval Signatures

Sub Total Amount	760.92
Sales Tax Amount	58.97
Total PO Amount	819.89

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5890	11	FL.CP.PISO	67100	00000	041A	819.89	2019

0001019128CHAVEZA30-APR-2019

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

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

All shipments, invoices, and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to shipment.

Authorized Signature

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: FAST SIGNS
 FAST SIGNS FOLSOM
 420 E BIDWELL STREET
 FOLSOM CA 95630
 United States

0000035178

Phone: (916) 608-4455
email: 457@fastsigns.com

Fax: (916) 608-8898

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

Business Unit: GENFD OPEN		Page
Req ID: 0001019128	Date: 04/26/2019	1
Requisition Name: 2019 FASTSIGNS FALCO STANDUPS		
Requester: Kristy Hart		
Requester Signature		
Buyer:		
Approved:		
Entered By: HARTK 26-APR-2019		

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	CUSTOM CUT FALCON MASCOT (COROPLAST 4 MIL, 48" X 72", 1 SIDED)	3	EA	253.64	760.92	

760.92 Sub-total
 58.97 Est. tax

Total Requisition Amount: 819.89

PER ESTIMATE # FOL-26020

SEND CONFIRMING PO TO VENDOR: 457@FASTSIGNS.COM

<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	041A	760.92

APR 30 P 1:53
 FID BUSINESS SERVICES

Approval Signature 	Approval Signature 	Approval Signature
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420 E Bidwell St
Folsom, CA 95630
(916) 608-4455

ESTIMATE

FOL-26020

More than fast. More than signs. ©
fastsigns.com/457

Payment Terms: Cash Customer

Created Date: 4/24/2019

DESCRIPTION: Falcon Mascot Coro

Bill To: Folsom Lake College
10 College Parkway
Folsom, CA 95630
US

Pickup At: FASTSIGNS
420 E Bidwell St
Folsom, CA 95630
US

Requested By: Kristy Hart
Email: Hartk@Flc.Losrios.Edu
Work Phone: (916) 608-6683

Salesperson: Shelley Saddler

NO.	Product Summary	QTY	UNIT PRICE	AMOUNT
1	Custom Cut Falcon Mascot	3	\$253.64	\$760.92
1.1	Coroplast 4 mil - (see order: 45575) Part Qty: 1 Width: 48.00" Height: 72.00" Sides: 1			

*** To proceed with the order a 50% deposit is required on orders over \$300. Orders less than \$300 require payment in full. Once paid, production begins or proof is provided if print ready file was not made available. ***

Subtotal:	\$760.92
Taxes:	\$58.98
Grand Total:	\$819.90

VISA - MASTERCARD - AMEX - DISCOVER

ACCT# _____

EXP DATE _____ CCV CODE _____ ZIP CODE _____

Signature: _____ **Date:** _____