

**FOLSOM LAKE COLLEGE  
REVOLVING FUND ACCOUNT**

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

CHECK NO. **F- 01911**

DATE **9/25/2018**

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

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

TO COLLEGE of the DESERT  
Attn: Elizabeth Goold, RN - HSACCC Corresponding Secretary  
43-500 MONTEREY AVE.  
PALM DESERT, CA 92260

REQUISITIONED BY  
OLR\_0001014894 KRAVCHUA / BROWN

|          |         |      |                  |         |       |      |               |        |
|----------|---------|------|------------------|---------|-------|------|---------------|--------|
| GENFD    | 5300    | 11   | FL.VS.HLTH       | 64400   | 00000 | 2019 | 101E          | 150.00 |
| BUS UNIT | ACCOUNT | FUND | DEPARTMENT (ORG) | PROGRAM | CLASS | BY   | PROJECT/GRANT | AMOUNT |

|          |         |      |                  |         |       |    |               |        |
|----------|---------|------|------------------|---------|-------|----|---------------|--------|
|          |         |      |                  |         |       |    |               |        |
| BUS UNIT | ACCOUNT | FUND | DEPARTMENT (ORG) | PROGRAM | CLASS | BY | PROJECT/GRANT | AMOUNT |

| QUANTITY | UNIT | DESCRIPTION   | UNIT PRICE | EST. TOTAL AMOUNT |
|----------|------|---|------------|-------------------|
| 1.00     | EA   | 2018 - 2019 HSACCC MEMBERSHIP FOR:<br>FOLSOM LAKE COLLEGE - NURSE MARY HANSEN | 150.000    | 150.00            |

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

DATE: \_\_\_\_\_

|   |   |   |                                       |
|---|---|---|---------------------------------------|
| <p><b>FOLSOM LAKE COLLEGE</b><br/>REVOLVING FUND ACCOUNT ULID 382004<br/>10 College Parkway • Folsom, CA 95630<br/>(916) 608-6549</p> | <p>JPMorgan Chase Bank, N.A.<br/>Sacramento, CA</p> | <p>CHECK<br/>No. <b>F- 01911</b><br/>September 25, 2018<br/>DATE: _____</p> | <p>90-7162<br/>3222</p>               |
| <p>PAY TO THE ORDER OF<br/>HSACCC *****</p>   |   | <p>\$ 150.00</p>  |                                       |
| <p>One Hundred Fifty and 00/100 *****</p>   |   | <p>DOLLARS</p>  | <p>*VOID 6 MONTHS FROM DATE DRAWN</p> |
| <p><b>NON-NEGOTIABLE</b></p>  |   |   |                                       |
| <p>ADMINISTRATIVE SERVICES</p>  |   |   |                                       |



## 2018-2019 Membership Application

Date Submitted: 9/18/18

First Name: MARY Last Name: HANSEN Licensure: RN, CNS  
 Position: COLLEGE NURSE Email: hansenm@flc.lasrios.edu  
 College Name: FOLSOM LAKE COLLEGE  
 College District: LOS RIOS Region: 2  
 Wk Address: 10 COLLEGE PARKWAY, FLI-52, FOLSOM, CA 95630  
 Wk. Phone: 916.608.6782 Fax: ( ) n/a M: ( ) n/a  
 Home Address: 960 PATRICK CIR, FOLSOM, CA 95630  
 **NEW Membership** (If you are new would you like mentoring? Yes  No )  **RENEWAL**

| MEMBERSHIP CATEGORY  | PAYMENT AMOUNT- CHECK ONE  |
|--|--|
| <input checked="" type="checkbox"/> <b>Regular Membership (Voting)</b><br>One Regular Membership per <b>Institution</b> : Each institution is eligible to cast one vote. Open to Health Care professionals who are responsible for student health services in a California Community College and meet credential requirements compliant with Title V 53411 (unless a standing HSACCC member prior to 2006) | <input checked="" type="checkbox"/> \$150 before Oct 1, 2018<br><input type="checkbox"/> \$155 Pay Pal before Oct 1, 2018<br><input type="checkbox"/> \$175 after Oct 1, 2018 renewals only<br><input type="checkbox"/> \$181 PayPal after Oct 1, 2018 renewals only |
| <input type="checkbox"/> <b>Associate Membership (Non-Voting)</b><br>Open to health services professionals and other interested persons (substitutes, psychological counselors, consultants, student services administrators, part-time employees) per HSACCC Bylaws Article IIIB.   | <input type="checkbox"/> \$50 before Oct 1, 2018<br><input type="checkbox"/> \$52 PayPal before Oct 1, 2018<br><input type="checkbox"/> \$75 after Oct 1, 2018 renewals only<br><input type="checkbox"/> \$78 PayPal after Oct 1, 2018 renewals only                 |
| <input type="checkbox"/> <b>Community Partner Membership (Non-Voting)</b><br>Open to community partners who actively collaborate with HSACCC in furthering the purpose/goals of the organization. No institutional membership is required. Community Partner membership requires appointment and approval of the Executive Board.  | <input type="checkbox"/> \$50 before Oct 1, 2018<br><input type="checkbox"/> \$52 PayPal before Oct 1, 2018<br><input type="checkbox"/> \$75 after Oct 1, 2018 renewals only<br><input type="checkbox"/> \$78 PayPal after Oct 1, 2018 renewals only                 |
| <input type="checkbox"/> <b>Emeritus (Non-Voting)</b> Granted by HSACCC upon individual's retirement   | No dues  |
| <input type="checkbox"/> <b>Honorary (Non-Voting)</b> For distinguished contribution to the aims of the organization. Appointed by Executive Committee and approved by membership.   | No dues  |

**Are you retiring this year?** Yes  No

\*\*Information held confidential\*\*

**Please check if you would like more information about:**

- Mentorship Program
- Participating in your local region activity planning
- Participating on HSACCC committees
  - Conference Planning Committee
  - Legislative Committee
  - Research Committee
- Participating in a Leadership Role (Executive Board)
- Other (list): \_\_\_\_\_

**Payment Due: July 1, 2018** Payment is delinquent after October 1, 2018. Sorry, we cannot accept purchase orders.

**Mail completed form and payment (made out to HSACCC) to:**  
 Elizabeth Goold, RN, HSACCC Corresponding Secretary  
 College of the Desert  
 43-500 Monterey Ave  
 Palm Desert, CA 92260

**Email:** egoold@collegeofthedesert.edu

Please attach a check or a copy of your PayPal receipt when submitting this application.

# Requisition

REVL FLO1961

**Supplier:** HSACCC 0000024031  
 ALLAN HANCOCK COLLEGE-ALEX BELL, RN  
 800 S COLLEGE DR  
 SANTA MARIA CA 93455  
 United States

**email:** abell@hancockcollege.edu

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

|  |              |             |
|--|--------------|-------------|
| <b>Business Unit:</b>                  | <b>GENFD</b> | <b>OPEN</b> |
| Req ID:                                | Date         | Page        |
| 0001014894                             | 09/18/2018   | 1           |
| Requisition Name:<br>HSACCC MEMBERSHIP |              |             |
| Requester                              | Bldg#        |             |
| Alina Kravchuk                         | STUSVC       |             |
| Requester Signature                    |              |             |
| Buyer: Suzanne Rouiller                |              |             |
| Approved:                              |              |             |
| Entered By: KRAVCHUA 18-SEP-2018       |              |             |

| Line-Schd | Description  | Quantity | UOM | Price  | Extended Amt | Due Date |
|-----------|--|----------|-----|--------|--------------|----------|
| 1-1       | MEMBERSHIP; 2018-2019 MEMBERSHIP<br>REGULAR MEMBERSHIP (VOTING) - \$150.00<br>BEFORE OCTOBER 1, 2018 | 1        | EA  | 150.00 | 150.00       |          |

Total Requisition Amount: 150.00

FOR: MARY HANSEN - FL1-52

| BU    | Acct | Fd | Org        | Prog  | Sub   | Proj | Amount |
|-------|------|----|------------|-------|-------|------|--------|
| GENFD | 5300 | 11 | FL.VS.HLTH | 64400 | 00000 | 101E | 150.00 |

2018 SEP 19 P 12:16  
 FLC BUSINESS SERVICES

|   |   |                    |
|---|---|--------------------|
| Approval Signature<br><i>Kathy Dean</i> | Approval Signature<br><i>Augustine Boyd</i> | Approval Signature |
|---|---|--------------------|