



FOLSOM LAKE COLLEGE
EL DORADO CENTER | RANCHO CORDOVA CENTER

10 College Parkway
Folsom, CA 95630

PURCHASE ORDER NO. CBF20031B

PO Date: Oct 2, 2019 Date Required:

Ordered By: WALLACE/SNOWDEN Requisition #: 42051

VENDOR: ACT COSTUME SHOP
1117 MARKET STREET
SAN FRANCISCO CA 94103
Email: adalba@act-sf.org

SHIP TO: FOLSOM LAKE COLLEGE
RECEIVING
10 COLLEGE PARKWAY
FOLSOM, CA 95630
BILL TO: FOLSOM LAKE COLLEGE
ATTN: BUSINESS SERVICES
10 COLLEGE PARKWAY
FOLSOM, CA 95630

PH: 415.439.2379

Line #	Item/Description	QTY	UOM	PO Price	Extended Amount
1	BLANKET PURCHASE ORDER FOR COSTUME RENTALS FOR: FOLSOM LAKE COLLEGE THEATRE ARTS DEPT. FALL 2019 - HOT L BALTIMORE	1.00	EA	\$500.000	\$500.00
	AUTHORIZED PERSONNEL: David Harris, Rebecca Redmond, Ian Wallace, Cameron Hoyt				
	Shipping/Handling (taxable)				

INSTRUCTIONS:

EMAIL INVOICE TO:
Mary Swanson 916-608-6695
swansomc@flc.losrios.edu

State Tax %

Sub Total

State Tax

Shipping

Total PO Amount

All shipments, invoices, and correspondence must be identified with our Purchase Order Number

Direct all deliveries and delivery documents to the SHIP TO address.

Direct all correspondence and invoices to the BILL TO address.

NO PAYMENT will be made without an invoice.

Payment Terms: NET 30

AUTHORIZED SIGNATURE AND DATE

Signature 10/02/19

FOLSOM LAKE COLLEGE
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CHECK ONE

- ASG(71,72)
- College Act. Trust(81)
- Foundation(83)
- IR(13,14)
- Harris Ctr(55)

CAMPUS-BASED REQUISITION

10-2-19
DATE

VENDOR American Conservatory Theater REQ. # CBF 42051

ADDRESS 1117 Market Street PO REQUIRED(circle one) YES NO

CITY San Francisco P.O. # CBF 2003175

STATE _____ ZIP _____ DATE REQUIRED 10-4-19

ITEM	DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL
1	ACT Costume Rentals for				500.00
2	the production of				
3	Hot L Baltimore Fall '19				
4	Authorized Users:				
5	David Harris				
6	Rebecca Redmond				
7	Jan Wallace				
8	Cameron Hoyt				
9					
10					

Check Distribution

- Call Student, Hold for pick up # _____
- Call 415-439-2379, Hold for pick up # _____
- Forward to _____
- Inter-Campus mail to _____
- USPS mail
- Other adalba@act.sf.org

Sub-Total	
Sales Tax	
Freight	
TOTAL	<u>500.00</u>

Account Name SCOFL / Bus Unit 5601 / Account 14 / Department FL.VT.THR / Program 10070 / Class 00000 / Project 077A / Amount \$ 500.00

Account Name _____ / Bus Unit _____ / Account _____ / Fund _____ / Department _____ / Program _____ / Class _____ / Project _____ / Amount \$ _____

AUTHORIZED M. Quinte
Club Officer/Requestor

APPROVED _____
Faculty Advisor/Administrator

Business Services Use Only

Budget Checked _____ Vendor ID _____

Voucher # _____ Date _____

Warrant # _____ Date _____