

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001108263

COMPL

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

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Date	Revision	Page
09/13/2019		1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	See Details
Reference:	Location / Dept	
1022153 CAMPBELL HANEYB	04ADMN PRES	

Supplier: 0000008390
COUNCIL FOR HI EDUC ACCREDITATION
P O BOX 37085
BALTIMORE MD 21297-3085

email:

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	ANNUAL MEMBERSHIP - (CHEA) COUNCIL FOR HIGHER EDUCATION ACCREDITATION - FOR FOLSOM LAKE COLLEGE, WHITNEY YAMAMURA COLLEGE PRESIDENT	1.00 EA	690.00	690.00	09/12/2019

PAY CHEA INVOICE# WASCJR_0172-01-FY20 08/23/2019

Paid Ch# 94-784893
9/18/19 Amt \$ 600.00

Sub Total Amount	690.00
Sales Tax Amount	0.00
Total PO Amount	690.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5300	11	FL.CP.OFFC	60100	00000	041A	690.00	2020

0001022153CHAVEZA12-SEP-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: COUNCIL FOR HI EDUC ACCREDITATION 0000008390
P O BOX 37085
BALTIMORE MD 21297-3085
United States

email:

Ship To: RECEIVING
10 COLLEGE PARKWAY
FOLSOM CA 95630

Business Unit:		GENFD	OPEN
Req ID:	Date	Page	
0001022153	09/09/2019	1	
Requisition Name:			
Council for Higher Ed Accred			
Requester	Bldg#		
Lindsey Campbell	PRES		
Requester Signature			
Buyer: Brenda Haney			
Approved:			
Entered By: CAMPBELL 09-SEP-2019			

Line-Schd	Description	Quantity	UOM	Price	Extended Amt Due Date
1-1	COUNCIL FOR HIGHER EDUCATION ACCREDITATION ANNUAL MEMBERSHIP DUES - PRESIDENT WHITNEY YAMAMURA	1	EA	690.00	690.00 05/03/2018

690.00 Sub-total
0.00 Est. tax

Total Requisition Amount: 690.00

PREPAY ATTACHED INVOICE WASCJR_0172-01-FY20 DTD 08/23/2019

<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	11	FL.CP.OFFC	60100	00000	041A	690.00

Approval Signature	Approval Signature	Approval Signature
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Council for Higher Education Accreditation

Address: P. O. Box 37085
Baltimore, MD 21297-3085
Phone: 202-955-6126
Fax: 202-955-6129
Inquiries: membership@chea.org



August 23, 2019

BILL TO:

CHEA INVOICE #: WASCJR-0172-01-FY20

Folsom Lake College
Mr. Whitney Yamamura
President
10 College Parkway
Folsom, CA 95630-6798
United States

DUES AMOUNT: \$690
FOURTH INVOICE

ANNUAL INSTITUTIONAL MEMBERSHIP July 1, 2019 to June 30, 2020

PAY ONLINE via Credit Card: (We accept MasterCard, Visa, Discover, and American Express)

Go to <https://chea.org/renew> - find your institution's invoice using the following
Logon Folso1158 and Password 1158

CHECK: Please be sure to include the invoice number (above) on the check and remit to the address above.

FAX: Enter credit card information below and fax to 202-955-6129:

Payment Amount: \$ _____

Credit Card Number: _____ Expiration Date: ____/____/____

Security Code: _____ (3-digit code on MasterCard, Visa and Discover; 4-digit code on American Express)

Cardholder's Name: _____

Billing Address: _____ Zip Code: _____

Cardholder's Signature: _____

Email for Receipt: _____

ELECTRONIC PAYMENT: (The originator agrees to pay all bank fees)

Wiring Instructions:

Bank name: BB&T
Bank Address: 1909 K St NW WDC 20006
ABA Routing #: 054001547
Acct Name: Council for Higher Education Accreditation
(CHEA)
Acct Number: 0005163200998
SWIFT code: BRBTUS33
CHIPS participant #: 0160

ACH Instructions:

Bank Name: BB&T
Bank ACH routing #: 054001547
Acct Name: Council for Higher Education Accreditation
(CHEA)
Acct Number: 0005163200998

Remittance Email: membership@chea.org

PURCHASE ORDER: Fax copy of purchase order to 202-955-6129.

CHEA FEDERAL I.D. NUMBER: 52-1994352

Membership dues for institutions are based upon core expenditures as defined in the Integrated Postsecondary Education Data System (IPEDS) - see next page. For billing questions, please call 202-955-6126 or email membership@chea.org.