

LOS RIOS COMMUNITY COLLEGE DISTRICT

**PURCHASE ORDER NO B200693
CHANGE ORDER**

COMPL

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

Date 08/19/2019	Revision 2 - 02/19/2020	Page 1
Payment Terms NET 30	Freight Terms Shipping Point	Ship Via Best Method
Reference: 1021549 WRIGHTM HANEYB		Location / Dept 04ADMN

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Supplier: 0000019730
CITY OF FOLSOM
ATTN: ACCOUNTS RECEIVABLE DEPT.
50 NATOMA STREET
FOLSOM CA 95630

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

email:

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	BLANKET PURCHASE ORDER FOR FACILITY USE RENTAL OF KEMP PARK SOFTBALL FIELD AS NEEDED FROM 12:00 PM TO 4:00 PM MONDAY THROUGH FRIDAY. ESTIMATED TOTAL OF 188 HOURS FROM AUGUST 26, 2019 THROUGH NOVEMBER 21, 2019 AT RATE OF \$15.00/PER HOUR.	1.00EA	3,590.00	3,590.00	11/21/2019

QUOTE / ESTIMATE# FLC-8219 08/02/19
KEMP SOFTBALL FIELD RENTAL USE: M-F 12PM - 4PM 47/DAYS X 4/HR/DAY A \$15.00/HR = \$2,820.00

CITY OF FOLSOM TO INVOICE FOLSOM LAKE COLLEGE - BILLING TERMS NET 30.

VALID FROM 08-26-2019 TO 11-21-2019

AUTHORIZED PERSONNEL:
MATT WRIGHT
JEANNE CROFF

02-13-20 INCREASE PO BY \$600.00 PER J. HARMAN. NEW PO TOTAL \$3420.00 - BH
02-19-20 INCREASE PO BY \$170.00 PER J. HARMAN. NEW PO TOTAL \$3590.00 - BH

Sub Total Amount	3,590.00
Sales Tax Amount	0.00
Total PO Amount	3,590.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5601	11	FL.VI.OFFC	61900	00000	046C	3,590.00	2020

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.

**LOS RIOS COMMUNITY COLLEGE DISTRICT PURCHASE ORDER NO B200693
CHANGE ORDER**

PURCHASING: (916) 568-3071 • FAX: (916) 568-3145
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Date	Revision	Page
08/19/2019	1 - 02/13/2020	1
Payment Terms	Freight Terms	Ship Via
NET 30	Shipping Point	Best Method
Reference:	Location / Dept	
1021549 WRIGHTM HANEYB	04ADMN	

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Supplier: 0000019730
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ATTN: ACCOUNTS RECEIVABLE DEPT.
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FOLSOM CA 95630

Ship To: FOLSOM LAKE COLLEGE
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FOLSOM CA 95630
United States

email:

Bill To: 1919 Spanos Court
Sacramento CA 95825-3981
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VALID FROM 08-26-2019 TO 11-21-2019

AUTHORIZED PERSONNEL:
MATT WRIGHT
JEANNE CROFF

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GENFD	5601	11	FL.VI.OFFC	61900	00000	046C	3,420.00	2020

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DO NOT SEND TO VENDOR

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LOS RIOS COMMUNITY COLLEGE DISTRICT PURCHASE ORDER NO B200693

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Date	Revision	Page
08/19/2019		1
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NET 30	Shipping Point	See Details
Reference:	Location / Dept	
1021549 WRIGHTM HANEYB	04ADMN	

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Supplier: 0000019730
 CITY OF FOLSOM
 ATTN: ACCOUNTS RECEIVABLE DEPT.
 50 NATOMA STREET
 FOLSOM CA 95630

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 RECEIVING
 10 COLLEGE PARKWAY
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 Sacramento CA 95825-3981
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CITY OF FOLSOM TO INVOICE FOLSOM LAKE COLLEGE - BILLING TERMS NET 30.

VALID FROM 08-26-2019 TO 11-21-2019

AUTHORIZED PERSONNEL:
 MATT WRIGHT
 JEANNE CROFF

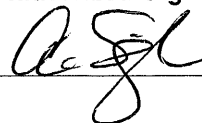
Sub Total Amount	2,820.00
Sales Tax Amount	0.00
Total PO Amount	2,820.00

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount	BYear
GENFD	5601	11	FL.VI.OFFC	61900	00000	046C	2,820.00	2020

0001021549CHAVEZA16-AUG-2019

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



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 MATERIAL SAFETY DATA SHEETS (MSDS) must be provided with the delivery of product as required by law.

Requisition

Supplier: CITY OF FOLSOM
 194 RANDALL DRIVE
 FOLSOM CA 95630
 United States

0000019730

email:

Ship To: 3753 BRADVIEW DRIVE
 SACRAMENTO CA 95827

Business Unit:		GENFD	OPEN
Req ID:	Date	Page	
0001021549	08/14/2019	1	
Requisition Name:			
CITY OF FOLSOM-KEMP PARK			
Requester			
Matthew Wright			
Requester Signature			
Buyer:	Brenda Haney		
Approved:			
Entered By:	M.J	14-AUG-2019	

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	BLANKET PURCHASE ORDER FOR KEMP PARK SOFTBALL FACILITY RENTAL FOR USE AS NEEDED NOON TO 4:00P.M. MONDAY THRU FRIDAY. TOTAL OF 188 HOURS AUGUST 26, 2019 THRU NOVEMBER 21, 2019.	188	EA	15.00	2,820.00	08/21/2019

2,820.00 Sub-total
0.00 Est. tax

Total Requisition Amount: 2,820.00

ATHLETIC OPERATIONS; ATTN: MATT WRIGHT

ESTIMATED PAYMENT \$15.00 PER HOUR.
 CITY OF FOLSOM TO INVOICE FOLSOM LAKE COLLEGE, BILLING TERMS, NET 30.

<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	5601	11	FL.VI.OFFC	61900	00000	046C	2,820.00

Approval Signature	Approval Signature	Approval Signature
---------------------------	---------------------------	---------------------------

LOS RIOS COMMUNITY COLLEGE DISTRICT

AGREEMENT/CONTRACT APPROVAL AND ROUTING SHEET

(Except for Grants & Categorical Contracts)

ARC [] CRC [] SCC [] FLC [x] DO [] IT [] FM [] OTHER _____

Agreement/Contract With: CITY OF FOLSOM

State the business terms of agreement: FACILITY RENTAL FOR SOFTBALL USE - CLASS PURPOSE

This agreement consists of the following documents: APPLICATION, FEE SCHULE LOCATION OF STORAGE CONTAINER - PIX, Quote

Funding Source: GENFD 5601 11 FL.VI.OFFC 61900 00000 Amount \$ PER HR \$ 15 OHC \$ 2,000.00

I have read and agree with the terms of this agreement:

[x] By: [Signature] Area Manager/Supervisor MATT WRIGHT (Print name) Date: 8.5.19

College VPA, DO-AVC, FM Director

I approve as to Substance

[x] By: [Signature] Augustine Chavez Jr. (Print name) Date: 08/15/19

Risk Management

[] By: _____ Date: _____

General Services

[] By: _____ Date: _____ Director of General Services

General Counsel (When necessary)

- [] Changes necessary as specified on the document or on the attached memorandum. [] Approved as to form.

[] By: _____ Date: _____ General Counsel

Los Rios Community College District

[] By: _____ Date: _____

- [] AVC of Finance [] VC of Finance and Administration [] VC of Ed & Tech.

Application for Use



PARKS & RECREATION | 50 NATOMA STREET, FOLSOM, CA 95630 | WWW.FOLSOM.CA.US

CITY OF
FOLSOM
DISTINCTIVE BY NATURE

Parks & Recreation Department

Application for Use of City Facility

Subject to Rules and Regulations – **Effective March 6, 2019**

Complete and return to the office at least one week in advance of date of use.

Name of Organization/Team: Los Rios Community College District/Folsom Lake College

Contact Person: Matt Wright

Address: 10 College Parkway

City: Folsom Zip: 95630

Day Phone: 916-608-6687 Evening Phone: _____

Email: wrightm@flc.losrios.edu

FACILITY DESIRED

Location (Park Site): Kemp Park

Type of Facility (Softball, Soccer, etc.): Softball field

Schedule of Use: Single Daily Multiple Days Weekly Monthly

Dates of Use: TBD to _____

Hours of Use: 12:00pm to 4:00pm

INFORMATION ABOUT USE

Purpose of Use: Collegiate softball practice

Clean up provided by user? YES NO

Estimated Attendance: 0

Will funds be generated through the use of the facility request? YES NO

*Sale of Alcohol? YES NO

*Sale of Goods? YES NO


*Must have ABC or Business License and must be approved by the City. Alcohol allowed at specific locations only.

INSURANCE REQUIREMENTS

Concurrent with the execution of this Use of City Facilities permit, user shall provide evidence of liability insurance with a minimum amount of \$1,000,000 per occurrence with \$2,000,000 in general aggregate and a separate endorsement naming the City of Folsom, its officers, agents and employees as an additional insured. User further agrees to indemnify, defend and hold harmless the City of Folsom, its officers, agents, and employees against any claims, demands, damages, costs, expenses of whatever nature, including court costs and attorney fees arising out of or resulting from user's use of City of Folsom facilities.

STATEMENT OF INFORMATION

My signature below certifies that I have read the conditions as set forth by the City of Folsom governing the use of items specified above, that I and/or my organization/team will take full responsibility for seeing that the use of these facilities/areas by the organization/team/self I represent will be in full adherence and compliance with these conditions, that I/we will hold the City of Folsom harmless from any damages, claims for damage for personal injury or death, damage to, or loss of property incurred in the use of these facilities/areas.

Signature: 
Print Name: Mario Rodriguez, Vice Chancellor Finance & Admin. Date: 8/12/19

Return completed application to: Andy Morin Sports Complex
66 Clarksville Road
Folsom, CA 95630
Phone: 916-461-6650

City of Folsom Parks & Recreation Department Use Only	
Approval Granted: <input type="checkbox"/> YES <input type="checkbox"/> NO	
If no, reason: _____	
Processed by: _____	Date: _____
Facility Use Fee: \$ _____	Field Prep Fee: \$ _____
Light Fee: \$ _____	Equipment Fee: \$ _____
Security Deposit (Amount): _____	Payment: <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card
Receipt #: _____	
Received by: _____	Date: _____
Less Deposit: \$ _____	
Outstanding Balance: \$ _____	
Total Due: \$ _____	
Payment (Amount): _____	Payment: <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card
Receipt #: _____	
Credit Card Number #: _____	
Expiration Date: _____	CVV #: _____
Cardholder Name: _____	
Signature: _____	
Certificate of Insurance Received: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Additional Insured Endorsement Received: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Business License: <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO ABC License: <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO	

Fee Schedule



PARKS & RECREATION | 50 NATOMA STREET, FOLSOM, CA 95630 | WWW.FOLSOM.CA.US

CITY OF
FOLSOM
DISTINCTIVE BY NATURE

Parks & Recreation Department Fee Schedule – Effective March 6, 2019

Facilities

	Non-Resident Fee per hour	Resident Fee per hour
Soccer Natural Grass	\$90	\$70
Soccer Artificial Turf	\$130	\$100
Soccer Lights (All soccer fields)	\$25	\$20
Roller Hockey Rink	\$45	\$30
Roller Hockey Rink with Lights	\$60	\$45
Volleyball Court (Sand or Turf)	\$35	\$25
Tennis Court	\$35	\$25
Pickleball Court	\$20	\$10

Softball Practice: Teams must be registered with USA Softball or provide proof of insurance.

Softball Field Picnic: Minimum of four (4) hour rentals; must provide proof of insurance.

Softball Practices	Non-Resident Fee per hour	Resident Fee per hour	Softball Field Picnic	Non-Resident Fee per hour	Resident Fee per hour
One (1) hour field	\$20	\$15	Four (4) hours field	\$55	\$45
Lights	\$15	\$15	Lights per hour	\$20	\$15
Field Prep	\$20	\$20	Lights (4) four hours	\$40	\$40
			Field Prep	\$20	\$20

Baseball Field

	Non-Resident Fee per hour	Resident Fee per hour
Grass infield – one (1) hour only	\$70	\$60
Lights	\$20	\$20
Field Prep	\$30	\$30

Parks & Recreation Department

Fee Schedule – Effective March 6, 2019

Tournament / Private Leagues

	Softball Field per day	Baseball Field per day
Deposit to Hold+	\$100	\$100
Security Deposit*	\$250	\$500
Non-Resident Field Rental Fee		
One (1) Field	\$225	\$400
Two (2) Fields	\$210	\$360
Three (3) or more Fields	\$200	N/A
Resident Field Rental Fee		
One (1) Field	\$200	\$300
Two (2) Fields	\$185	\$290
Three (3) or more Fields	\$175	N/A
Mandatory Field Prep (after three (3) games)	\$20	\$30
Lights	\$10 per hour	\$20 per hour

Includes prepped fields at the start of the tournament/league.

REFUNDS

+ Deposit – Full refund with 60 days written notification.

Half refund with 30 days written notification.

No refund unless the weekend is rebooked.

* Security Deposit – Refundable unless needed to offset damages and clean up.

City of Folsom

Parks and Recreation Department

66 Clarksville Road
Folsom, CA 95630
Phone 916-461-6661 Fax 916-461-6650

QUOTE

DATE:
August 2, 2019

INVOICE #1
FLC-8219

Bill To:
Folsom Lake College
Attn: Matt Wright
916-608-6686
wrightm@flc.losrios.edu

For:
Rental of Softball/Baseball Fields

DESCRIPTION	AMOUNT
Field Rental - Kemp Softball Field 1 August 27 - October 30, 2019 excluding September 2 M - F 12pm - 4pm 47 days x 4 hr/day x \$15/hr	\$ 2,820.00
Field Rental - Lembi Baseball Field 1 August 27 - October 30, 2019 excluding September 2 M - F 12pm - 4pm 47 days x 4 hr/day x \$60/hr	\$ 11,280.00
<i>Note: This quote does not include any scrimmage days on Friday or Saturday. Those dates are based on availability and will be included on a as needed basis once City receives the schedule to review.</i>	
TOTAL	\$ 14,100.00

Make all checks payable to CITY OF FOLSOM

If you have any questions concerning this invoice, contact Derik Perez, Recreation Supervisor at 916-461-6653
Please visit our website at www.folsom.ca.us
or email: dperez@folsom.ca.us

THANK YOU FOR YOUR BUSINESS!

Keenan & Associates
2868 Prospect Park Drive, #600
Rancho Cordova, CA 95670

MAIL DOCUMENT

Certificate of Insurance Delivery by **ecertsonline**™

The City of Folsom Parks & Recreation
P.O. Box 15649
50 Natoma Street
Sacramento CA 95852

Sender: Holly Samuel

Phone: 916-859-7160

Subject: Cert No. 50438311 - Certificate of Coverage: Los
Rios Community College District - The City of
Folsom Parks & Recreation

Date: 8/6/2019

No. of Pages: 4

URL: www.keenan.com

This document was created by eCertsONLINE.

The attached document(s) contain certification of insurance coverage for the insured named in the subject above. Your company is listed as the organization requesting receipt of these documents.

If this document is sent via e-mail, you must click on the attached PDF document. The document is in a pdf format, and you must have Adobe Acrobat Reader installed on your system. To download the Adobe Reader for free, visit www.Adobe.com.

If you have any questions regarding the content of this message, you should contact the Producer/ Agency listed on the attached/linked documents.

THIS MESSAGE IS INTENDED FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THE MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE, AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA REGULAR POSTAL SERVICE.

ADMINISTRATOR: LICENSE # 0451271
 Keenan & Associates
 2868 Prospect Park Drive, #600
 Rancho Cordova, CA 95670
 916-859-7160
 www.keenan.com

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS BELOW.

COVERED PARTY:
 Los Rios Community College District
 1919 Spanos Court
 Sacramento CA 95825

ENTITIES AFFORDING COVERAGE:
 ENTITY A: Statewide Association of Community Colleges
 ENTITY B:
 ENTITY C:
 ENTITY D:
 ENTITY E:

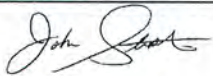
THIS IS TO CERTIFY THAT THE COVERAGES LISTED BELOW HAVE BEEN ISSUED TO THE COVERED PARTY NAMED ABOVE FOR THE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE COVERAGE AFFORDED HEREIN IS SUBJECT TO ALL THE TERMS AND CONDITIONS OF SUCH COVERAGE DOCUMENTS.

ENT LTR	TYPE OF COVERAGE	COVERAGE DOCUMENTS	EFFECTIVE/ EXPIRATION DATE	MEMBER RETAINED LIMIT / DEDUCTIBLE	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> GOVERNMENT CODES <input checked="" type="checkbox"/> ERRORS & OMISSIONS <input type="checkbox"/>	SWC 01505-02	7/1/2019 7/1/2020	\$ 250,000	COMBINED SINGLE LIMIT EACH OCCURRENCE \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> HIRED AUTO <input type="checkbox"/> NON-OWNED AUTO <input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> AUTO PHYSICAL DAMAGE			\$	COMBINED SINGLE LIMIT EACH OCCURRENCE \$
A	PROPERTY <input checked="" type="checkbox"/> ALL RISK <input checked="" type="checkbox"/> EXCLUDES EARTHQUAKE & FLOOD <input type="checkbox"/> BUILDER'S RISK	SWC 01505-02	7/1/2019 7/1/2020	\$ 100,000	\$ 250,250,000 EACH OCCURRENCE
A	STUDENT PROFESSIONAL LIABILITY	SWC 01505-02	7/1/2019 7/1/2020	\$ 5,000	\$ Included EACH OCCURRENCE
	WORKERS COMPENSATION <input type="checkbox"/> EMPLOYERS' LIABILITY			\$	<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$ E.L. EACH ACCIDENT
	EXCESS WORKERS COMPENSATION <input type="checkbox"/> EMPLOYERS' LIABILITY			\$	\$ E.L. DISEASE - EACH EMPLOYEE \$ E.L. DISEASE - POLICY LIMITS
	OTHER			\$ \$	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL PROVISIONS:
 Proof of coverage as respects the use of facilities agreement between Los Rios Community College District & the City of Folsom, Parks and Recreation Department for the use of Kemp Park's softball field for collegiate softball practice.

CERTIFICATE HOLDER:
 The City of Folsom Parks & Recreation
 P.O. Box 15649
 50 Natoma Street
 Sacramento CA 95852

CANCELLATION.....SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING ENTITY/JPA WILL ENDEAVOR TO MAIL ___ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE ENTITY/JPA, ITS AGENTS OR REPRESENTATIVES.


 John Stephens
 AUTHORIZED REPRESENTATIVE

DISCLAIMER

The Certificate of Coverage on the reverse side of this form does not constitute a contract between the issuing entity(ies), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the coverage documents listed thereon.

ENDORSEMENT

ADDITIONAL COVERED PARTY

COVERED PARTY	COVERAGE DOCUMENT	ADMINISTRATOR
Los Rios Community College District	SWC 01505-02	Keenan & Associates

Subject to all its terms, conditions, exclusions, and endorsements, such additional covered party as is afforded by the coverage document shall also apply to the following entity but only as respects to liability arising directly from the actions and activities of the covered party described under "as respects" below.

Additional Covered Party:

The City of Folsom Parks & Recreation
P.O. Box 15649
50 Natoma Street
Sacramento CA 95852

As Respects:

Proof of coverage as respects the use of facilities agreement between Los Rios Community College District & the City of Folsom, Parks and Recreation Department for the use of Kemp Park's softball field for collegiate softball practice.

The City of Folsom, its officers, agents and employees are included as an Additional Covered Party as respects the actions and activities of the Covered Party.



Authorized Representative

Issue Date: 8/6/2019