



LIMITED PURCHASE ORDER
 (Not to Exceed \$200.00)

| | |
|---|--|
| VENDOR NAME AND ADDRESS: Tony Humphreys 4274 Gailey Circle, Cameron Park CA 95682 | DELIVERY INSTRUCTIONS: <input checked="" type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call |
|---|--|

| ITEM | DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES | ORDERED | | | UNIT PRICE | TOTAL |
|------|--|----------|------|-----------|------------|-------|
| | | QUANTITY | UNIT | STOCK NO. | | |
| 1 | Reimbursement for Tour supplies | | | | | |
| 2 | from Michaels | | | | | |
| 3 | | | | | | |
| 4 | Ribbon | 4 | | | 3.99 | 15.96 |
| 5 | Paid: | | | | | |
| 6 | Check#: 94-788272 | | | | | |
| 7 | Date: 12/3/2019 | | | | | |
| 8 | Amount: \$17.2 | | | | | |
| 9 | Voucher#: | | | | | |
| 10 | | | | | | |

Purchases Charged to Categorical Programs, Grants or Special Projects
 This purchased is in compliance with the requirements of:

SEAP

Program Name: _____
 For grants/special projects: **570A**
 Project/Grant Number

Program Goal/Objective Number/Explanation

| | |
|--|--------------|
| SUB-TOTAL | 15.96 |
| SALES TAX | 1.24 |
| TOTAL (Not to Exceed \$200.00) | 17.20 |

VENDOR: Reference P.O. number on all invoices and packing slips. Total invoice may not exceed \$200.00 including tax and shipping costs. Mail invoices in duplicate to: Los Rios Community College District, Accounting Department, 1919 Spanos Court, Sacramento, CA 95825.

I/WE hereby certify the items/services listed above are to be obtained in accordance with District Regulation 8323, Section 4, Conflict of Interest, and all other applicable district, state, and federal policies, rules, regulations, and laws.

REQUESTED BY: Tony Humphreys TYPED/PRINT DATE: 11/25/2019

REQUESTED BY: Tony Humphreys SIGNATURE DATE: 11/25/2019

APPROVED: Kellie Butler DEAN OR OTHER AUTHORIZED SIGNATURE DATE: 11/25/19

APPROVED: _____ VICE PRESIDENT, ADMINISTRATION DATE

| | |
|---|----------------|
| Received by | Date |
| <u>GENFD 4500 / 12 / FL-VS-SEAP</u> | |
| Bus. Unit Account Fund Org | |
| <u>68210 / 00000 / 2020 / 570A</u> | <u>\$17.20</u> |
| Program Sub-Class BY Proj/Grnt Amount | |
| Bus. Unit Account Fund Org | |
| Program Sub-Class BY Proj/Grnt Amount | |

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| | |
|---|------------------------------|
| 2859017 SALE | 0409 2046 001 11/20/19 17:40 |
| CEL RBN 360N DF A 400100695821 2 @ 3.99 | 7.98 |
| CEL RBN 360N TURQ 886946833977 2 @ 3.99 | 7.98 |
| SUBTOTAL | 15.96 |
| Sales Tax 7.75% | 1.24 |
| TOTAL | 17.20 |

ACCOUNT NUMBER *****4811
Visa 17.20

APPROVAL: 020245 CHIP ONLINE
Application Label: VISA CREDIT
AID: A0000000031010
TVR: 8080008000
TSI: 6800

This receipt expires at 180 days on 05/23/20

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