



LOS RIOS COMMUNITY COLLEGE DISTRICT
1919 Spanos Court • Sacramento, CA 95825-3981

P.O. No. F 3252

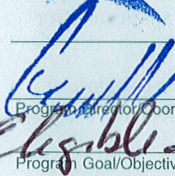
Date 11/21/19

LIMITED PURCHASE ORDER
(Not to Exceed \$200.00)

VENDOR NAME AND ADDRESS: School Specialty PO Box 8030 Appleton, WI 54912-8030	DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call 10 College Parkway Folsom, CA 95630
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ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	Compass 0.55 10B	10	ea	1410168	11.22	112.20
2	Base Plate					
3						
4						
5	Paid:					
6	Check#: 94-788510					
7	Date: 12/5/2019					
8	Amount: 120.90					
9	Voucher#:					
10						

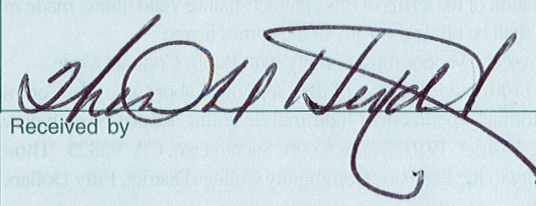
Purchases Charged to Categorical Programs, Grants or Special Projects
This purchased is in compliance with the requirements of:


 Program Name: Goldenrod
 For grants/special projects: 700P
 Project/Grant Number: 700P
 Program Goal/Objective Number/Explanation: materials + supplies

SUB-TOTAL	112.20
SALES TAX	8.70
TOTAL (Not to Exceed \$200.00)	120.90

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.

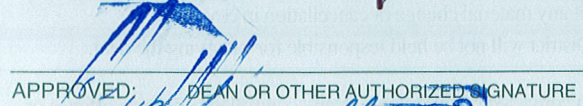
Received by:  Date: 11/21/19

REQUESTED BY: THERESA HENDRICKS TYPED/PRINT DATE: 11/21/19

Bus. Unit: GENFO 4300/12 Account: FL.VI.PHYS Fund: FL.VI.PHYS Org: FL.VI.PHYS

REQUESTED BY:  DATE: 11/21/19

Program: 19020 Sub-Class: 0000 BY: 2020 Proj/Grnt: 700P Amount: \$ 120.90

APPROVED:  DEAN OR OTHER AUTHORIZED SIGNATURE DATE: 11-21-19

Bus. Unit: Account: Fund: Org:

APPROVED:  VICE PRESIDENT, ADMINISTRATION DATE: 11/22/19

Program: Sub-Class: BY: Proj/Grnt: Amount:



P. O. Box 8030
Appleton, WI 54912-8030

SEND ORDERS & CORRESPONDENCE TO
SCHOOL SPECIALTY
PO BOX 1579
APPLETON, WI 54912-1579

Toll Free Phone (888) 388-3224
Toll Free Fax (888) 388-6344

Corporate FID# 39-0971239

On receipt of order, examine the carton contents for damage or lost product. Retain damaged items and their packaging. Contact us within 10 days for damage, 30 days for shortages. Product returned without authorization, additional items not part of the original authorization, or products arriving in an unsellable condition will not be eligible for credit and product will not be shipped back to the customer.

PLEASE NOTE: Your invoice now includes shipment and delivery tracking information on the last page of your invoice and following the invoice total.

Invoice

Invoice Number : 208122891944 Page 1 of 1
Order/Ref Number : 53714475
Invoice Date : 20-MAY-2019 Currency : USD 081-810-01
Customer Number : 131052
PO Number : 0001105500
Ship To Attention : * RECEIVING
Bill To Attention :

Ship To : FOLSOM LAKE COLLEGE
10 COLLEGE PKWY
FOLSOM, CA 95630-6798

Bill To :  000000
LOS RIOS COMM CLG DIST
1919 SPANOS CT
SACRAMENTO, CA 95825-3905

Quantity Ordered	UOM	Quantity Shipped	Quantity Remaining	Ordered Item	Our Item (if different)	Description	Unit Price	Net Price	Extended Price
10	EA	10		1410168		COMPASS O.S.S. 10B BASE PLATE	11.220	11.220	112.20
								Subtotal \$	112.20
								Taxes \$	8.70
								Shipping/Handling \$.00
							INVOICE	Total \$	120.90

Delivery Tracking Information:

Carrier Reference #
UPS - SS 1Z0426810325030399

Standard delivery terms shall be F.O.B. origin. Ownership and title shall pass to Buyer when products are delivered to Carrier unless otherwise agreed to in writing.

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REMITTANCE STUB

To ensure proper credit, please return this portion with remittance.

Customer Name: LOS RIOS COMM CLG DIST
and PO Number: 0001105500

Customer Number : 131052 USD
Invoice Number : 208122891944
Invoice Date : 20-MAY-2019
Due Date : 19-JUN-2019
Taxes : \$ 8.70
Shipping/Handling : \$ 0.00
Invoice Amount : \$ 120.90
Less payments : \$ 0.00
Balance DUE: \$ 120.90
Remittance Amount : \$ _____

Make Checks
Payable To: SCHOOL SPECIALTY
& Mail To: 32656 COLLECTION CENTER DR
CHICAGO, IL 60693-0326



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