



FOLSOM LAKE COLLEGE
EL DORADO CENTER | RANCHO CORDOVA CENTER

10 College Parkway
Folsom, CA 95630

PURCHASE ORDER NO. CBF20084

PO Date: May 26, 2020 Date Required: Jun 10, 2020

Ordered By: Croff/Palos Requisition #: 42741

VENDOR: STUDENT ATHLETE SASHES
37445 VIADE LOS ARBOLES
TEMECULA CA 92592
Camille@studentathletesashes.com

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

Line #	Item/Description	QTY	UOM	PO Price	Extended Amount
1	PER QUOTE 052020				
	Item : Silver "V" Sash with Falcon Logo Embroidered & Black Embroidered Lettering : Student - Athlete	20.00	EA	\$30.000	\$600.00
	Shipping/Handling (taxable)				

INSTRUCTIONS:

EMAIL INVOICE TO: Joany Harman
harmanj@flc.losrios.edu

State Tax % 7.75%

Sub Total	\$600.00
State Tax	\$46.50
Shipping	\$30.00
Total PO Amount	\$676.50

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

Joany Harman 5/26/20



STUDENT . ATHLETE . SASHES

37445 Via De Los Arboles . Temecula . California . 92592

www.StudentAthleteSashes.com
StudentAthleteSashes@hotmail.com
(951) 972 - 0846

Date: May 20, 2020

To: Ron Richardson
Athletic Coordinator
Folsom Lake College
10 College Parkway
Folsom, CA 95630
916-608-6812
richarr@flc.losrios.edu

QUOTE #052020

Folsom -ATHLETIC DEPT.		Totals
Item : Silver "V" Sash with Falcon Logo Embroidered & Black Embroidered Lettering : Student - Athlete		
Price: \$30.00(each)		
Quantity	20	\$ 600.00
Taxes	7.75%	\$46.50
Sub Total		\$646.50
Shipping, Handling and Insurance		\$30.00
Balance		\$ 676.50

Billing Information:

*****Please make checks payable to: Student Athlete Sashes

Our Mailing Address:
Student Athlete Sashes
37445 Via De Los Arboles
Temecula, California 92592

CHECK ONE

ASG(71,72)

College Act. Trust(81)

Foundation(83)

IR(13,14)

Harris Ctr(55)

CAMPUS-BASED REQUISITION

DATE _____

VENDOR _____ REQ. # CBF _____

ADDRESS _____ PO REQUIRED(circle one) YES NO

CITY _____ P.O. # CBF _____

STATE _____ ZIP _____ DATE REQUIRED _____

ITEM	DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Check Distribution

Call Student, Hold for pick up # _____

Call _____, Hold for pick up # _____

Forward to _____

Inter-Campus mail to _____

USPS mail

Other _____

Sub-Total	
Sales Tax	
Freight	
TOTAL	

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

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

AUTHORIZED _____
Club Officer/Requestor

APPROVED _____
Faculty Advisor/Administrator

Business Services Use Only

Budget Checked _____ Vendor ID _____

Voucher # _____ Date _____

Warrant # _____ Date _____