PURCHASE ORDER NO 0001107274 LOS RIOS COMMUNITY COLLEGE DISTRICT

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.

Supplier: 0000024305

US BANK

P. O. BOX 6343

FARGO ND 58125-6343

Phone: Fax:

(800) 344-5696 (866) 229-9625

email:

Date	Revision	Page
08/07/201	.9	1
Payment To	erms Freight Term	s Ship Via
NET 30	Shipping Point	See Details
Reference:		Location / Dept
1021157 MI	TCHINERB HANEYB	04CYPH144 CTE

Ship To:

FOLSOM LAKE COLLEGE

RECEIVING

10 COLLEGE PARKWAY FOLSOM CA 95630-6798

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	CT REGISTRY REVIEW PROGRAM - INSTRUCTOR EDITION	1.00EA	219.00	219.00	08/12/2019
2- 1	CONTINUING EDUCATION DILIGENCE AND ACTIVITY REPORT (CEDAR) - CT PROGRAM	1.00EA	49.00	49.00	08/12/2019
3- 1	CONTINUING EDUCATION DILIGENCE AND ACTIVITY REPORT (CEDAR) - MRI PROGRAM	1.00EA	49.00	49.00	08/12/2019
THIS ITEM	NON-TAXABLE - ELECTRONIC DELIVERY ONLY				
4- 1	UPS 2ND DAY AIR FOR LINES 1 & 2	1.00EA	15.00	15.00	08/07/2019

CREDIT CARD PURCHASE PLACED 08/17/19 - BH

MIC - Medical Imaging Consultants, Inc. 1037 US Hwy 46, Suite G2 Clifton, NJ 07013 1-800-589-5685 1-973-574-8000

Email: info@micinfo.com

Paid Ch# 94-785234 9/16/19 Amt \$ 352.77

Sub Total Amount Sales Tax Amount Total PO Amount

332.00 20.77 352.77

GENFD

Acct 12

FL.VI.SWPA

Proa 49000 00000

Sub

Proi 483Y <u>Amount</u> 352.77 <u>BYear</u> 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.

Requisition

Supplier: MIC 0000040542 **Business Unit:** GENFD **OPEN** Page 1037 US HWY 46 STE G2 Req ID: Date CLIFTON NJ 07013 0001021157 07/30/2019 **United States** Requisition Name: FY20 MIC INSTRUCTOR TEXTBOOKS (973) 574-8000 Fax: (973) 574-8001 Phone: Requester Bldg# email: Brandi Mitchiner CTE Requester Signature Ship To: RECEIVING

10 COLLEGE PARKWAY
FOLSOM CA 95630-6798

Buyer: Brenda Haney
Approved:
Entered By: MITCHINB 30-JUL-2019

Line-Schd Description Quantity UOM Price Extended Amt Due Date 1-1 CT REGISTRY REVIEW PROGRAM -EΑ 219.00 219.00 08/12/2019 **INSTRUCTOR EDITION** CONTINUING EDUCATION DILIGENCE AND EΑ 49.00 08/12/2019 2-1 1 49.00 ACTIVITY REPORT (CEDAR) - CT PROGRAM CONTINUING EDUCATION DILIGENCE AND 49.00 08/12/2019 FΑ 3-1 1 49.00 ACTIVITY REPORT (CEDAR) - MRI PROGRAM 30.00 08/12/2019 UPS 2ND DAY AIR (2 BUSINESS DAYS) 15.00 4-1 2 EΑ

Line3 non taxable and electronic delivery -L4 Quantity 1 Amount \$15 Total tax amount is \$20.77 Total Requisition Amount: 373.90

PURCHASING: PLEASE EXPEDITE PROCESSING. ORDER FORMS ARE VOID AFTER AUGUST 16, 2019.

 BU
 Acct
 Fd
 Org
 Prog
 Sub
 Proj
 Amount

 GENFD
 4300
 12
 FL.VI.SWPA
 49000
 00000
 483Y
 347.00

Purchases Charged to Catagorical Programs, Grants or Special Project.
This purchase is in compliance with the requirement of
For grants/special projects
Name:

Approval Signature	Approval Signature	Approval Signature

Course Materials Order Form for

Folsom Lake College

Instructions: Use one Order Form for each purchase. Please provide the information requested and ensure that your completed form and payment are received by the deadline indicated below. Any questions? Just call 800-589-5685!

1. Contact Information	2. Purchasing Terms		
r. 61.11	This purchase is subject to approval by MIC.		
OMr. OMs. OMs. OMs. Oms. Title: Imaging Instructor	FLC has agreed to purchase a copy of MIC's CT Registry Review Program - Academic Edition for each student enrolled in Computed Tomography II.		
Last 4 of SS #: \\ \frac{1}{3} \(\frac{1}{9} \) Date of birth: \\ \frac{1}{2} / \frac{1}{4y} / \frac{82}{year}	This offer is valid only for enrollees in the FLC course session beginning on August 27, 2019. Enrollment in this course offers students the opportunity to earn the Category A CE credits associated with MIC's CT Registry Review Program.		
Certifications: ARRT (R) CT (MR) for example R.T.(R), R.T. (R)MI, CNMT, RDMS, Sic. Shipping Address (select one): AWork D Home Facility name (if Work): FOLSOM LAKE COLLEGE Department (if Work): CAP LLR FICHNICAL EQUICATION	• FLC is authorized to use MIC's CT Registry Review Program - Academic Edition and associated educational content for its Computed Tomography II course session beginning on August 27, 2019 and may not distribute or reuse MIC's educational content for any other purpose or in any subsequent activity or present MIC's educational material in any other format than that previously agreed upon in writing. • All exams must by proctored by an Instructor and retrieved immediately at the end of the exam. Participants may not copy or retain any exam content. • The completed Order Form must be received at MIC by August 16, 2019 This Order Form is VOID after August 16, 2019. • Please retain a copy of this Order Form for your records. All sales are final and non-refundable. Yes, I agree to the above Purchasing Terms: Signature (required):		
Street Address: 10 COLLEGE PARKWAY (PO Boxes not accepted) City/State/Zip: FOLSOM, CA 950,30 (US Addresses only) Home: ()			
3. Fees & Payment Information Standard FLC	Card Number Expiration Date (mm/yy)		
Shipping: \$\int \\$0.00 UPS Ground (7-10 business days) \$\int \\$15.00 UPS 2nd Day Air (2 business days) Total (Materials fee plus Shipping): \$\int \frac{263.00}{263.00}\$	Cardholder's Name (As appears on card) Company Name (If applicable) Cardholder Billing Address		
	MIC Use Only • 6-474 AVS Apprvl Inv # Total Total		

Course Materials Order Form for

Folsom Lake College

Instructions: Use one Order Form for each purchase, Please provide the information requested and ensure that your completed form and payment are received by the deadline indicated below. Any questions? Just call 800-589-5685!

1. Contact Information	2. Purchasing Terms
TM: First/Last Name: Evin Schall	This purchase is subject to approval by MIC.
Mr. Pirsulast Name: Crive School Mrs. Title: Imaging Instructor	• FLC has agreed to purchase a copy of MIC's MRI Registry Review Program - Academic Edition for each student enrolled in Magnetic Resonance Imaging II.
Last 4 of SS #: 1347 Date of birth: 12/14/82 month day year	This offer is valid only for enrollees in the FLC course session beginning on August 26, 2019. Enrollment in this course offers students the opportunity to earn the Category A CE credits associated with MIC's MRI Registry Review Program.
Certifications: ARRICR CCT CMP for example: R.T.(R), R.T.(R), CNNT, RDMore for Shipping Address (select one): POWork Home Facility name (if Work): FOLSOM WKL COULGE Department (if Work): CWELY TECHNICAL EDUCATOR)	FLC is authorized to use MIC's MRI Registry Review Program - Academic Edition and associated educational content for its Magnetic Resonance Imaging II course session beginning on August 26, 2019 and may not distribute or reuse MIC's educational content for any other purpose or in any subsequent activity or present MIC's educational material in any other format than that previously agreed upon in writing. All accompany to the second of the s
Street Address: 10 COLLEGE PARKWAY	 All exams must by proctored by an Instructor and retrieved immediately at the end of the exam. Participants may not copy or retain any exam content.
City/State/Zip: FOUSOM, CA 95030	The completed Order Form must be received at MIC by August 16, 2019 This Order Form is VOID after August 16, 2019.
Home: ()	Please retain a copy of this Order Form for your records. All sales are final and non-refundable. Yes, I agree to the above Purchasing Terms: Signature (required): Ord
3. Fees & Payment Information	
Course Materials fee: MIC Fee Fee Subtotals	Card Number Expiration Date (mm/yy) X Cardholder's Signature (Required)
Shipping:	
St. St. Out UPS Ground (7-10 business days) St. St. Out UPS 2nd Day Air (2 business days) Total (Materials fee plus Shipping): St. Out UPS Ground (7-10 business days) FREE! I 5 · OU St. Out UPS UPS Ground (7-10 business days) Total (Materials fee plus Shipping): St. Out UPS UPS Ground (7-10 business days)	Cardholder's Name (As appears on card) Corapany Name (If applicable) Cardholder Billing Address
	MIC Use Only • 6-474 AVS Apprvi Inv # Total Grad Imaging Consultants, Inc. 15 Hwy 46, Sta G2 • Clifton NJ 07013-2445 • 850-569-5685

STRONG WORKFORCE EXPENDITURE CHECKLIST

Requisition/BPO/Travel Authorization Number:

Data	
vale	ı,

1)	Broaden and enhance career exploration and planning, work-based learning opportunities, and other supports for students. (Student Success - Recommendation #1)	
2)	Improve CTE student progress and outcomes. (Student Success - Recommendation #2)	
3)	Evaluate, strengthen, and revise the curriculum development process to ensure alignment from education to employment. (Curriculum - Recommendation #7)	
4)	Develop, identify and disseminate effective CTE practices. (Curriculum - Recommendation #11)	
5)	Enhance professional development opportunities for CTE faculty to maintain industry and program relevance. (CTE Faculty - Recommendation #15)	
6)	Improve the quality, accessibility, and utility of student outcome and lmi data to support students, educators, colleges, regions, and employers in CTE program development and improvement efforts. (Workforce Data & Outcomes - Recommendation #9)	
Budget String:	GENFD /12/ / 00000 /2020 /	
Current Balance in Budget String:		