## Los Rios Community College District

Purchasing: (916)568-3071 \* FAX (916) 568-3145 LRCCDpurchase@losrios.edu

Accounting Ops: (916)568-3065 \* FAX (916) 286-3636 Acctg-ops@losrios.edu

PLEASE SEE TERMS AND CONDITIONS APPENDED TO THIS PO

Supplier: 0000030967 NAACLS 27321 NETWORK PL CHICAGO IL 60673-1273

(773) 714-8880 (773) 714-8886 Phone: Fax:

email:

#### PURCHASE ORDER NO 0001112791

Date 08/19/2020	Revision	Page 1
Payment Terms	Freight Terms	Ship Via
NET 30 SI	ipping Point	Best Method
Reference:		Location / Dept
1027075 MESAC	HANEYB	04CYPH144

Ship To:

FOLSOM LAKE COLLEGE

RECEIVING

10 COLLEGE PARKWAY FOLSOM CA 95630 United States

Bill To:

Invoice to: acctg-ops@losrios.edu

1919 Spanos Court

Sacramento CA 95825-3981

United States

Tax Exempt? N Line-Sch	Item/Description	Quantity UOM	PO Price	Extended Amt	Due Date
E1110 0011	Kumbusunption	Quantity Cole	FOFIICE	Extended Ann	Due Date
1- 1	SITE VISIT PREPARATION FEE	1.00JOB	500.00	500.00	08/18/2020
2- 1	EXPENSES INCURRED FOR SITE VISIT: TRAVEL FEES	1.00 JOB	750.60	750,60	08/18/2020
3- 1	EXPENSES INCURRED FOR SITE VISIT: LODGING FEES	1.00 JOB	561.00	561.00	08/18/2020
4- 1	EXPENSES INCURRED FOR SITE VISIT: MEAL FEES	1.00JOB	131.42	131.42	08/18/2020
5- 1	EXPENSES INCURRED FOR SITE VISIT: MILEAGE FEES	1.00JOB	70.20	70.20	08/18/2020

PREPAY INVOICE 23688 -

Sub Total Amount Sales Tax Amount Total PO Amount

2,013.22 0.00 2,013

BU GENFD Acct Fd 5890 12

Org FL. VI. SWPA

Prog Sub 12050 00000

Proj 484Y Amount

BYear

0001027075CHAVEZA18-AUG-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 good and delivery documents to the Receiving Department at the site. Failure to so do will delay payment processing. Vendor is responsible for obtaining verification of delivery by authorized Receiving Room personnel. Receipt of good 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.

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Tax Exempt? N					
Line-Sch Item/De	scription	Quantity UOM	PO Price	Extended Amt	Due Date

Verification of this purchase order can be made using the Los Ríos Community College District web site listed below. If you have any questions, please contact the Purchasing Office at (916)568-3071.

http://www.losrios.edu/purchasing/povalidation

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 AUTHORIZED SIGNATURE ON PO TOTAL PAGE

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## Requisition

0000030967

Supplier: NAACLS

27321 NETWORK PL CHICAGO IL 60673-1273

**United States** 

**Phone:** (773) 714-8880

email:

**RECEIVING** Ship To:

10 COLLEGE PARKWAY FOLSOM CA 95630

**Fax:** (773) 714-8886

Colleen Mesa Requester Signature

Business Unit:

Requisition Name: NAACLS-MLT Site Visit

0001027075

Req ID:

Buyer: Brenda Haney

Approved:

Requester

Entered By: MESAC 14-AUG-2020

**GENFD** 

08/14/2020

Date

Line-Schd	Description	Quantity UOI	M Price	Extended Amt Due Date
1-1	SITE VISIT PREPARATION FEE	1 JO	B 500.00	500.00
2-1	EXPENSES INCURRED FOR SITE VISIT: TRAVEL FEES	1 JO	B 750.60	750.60
3-1	EXPENSES INCURRED FOR SITE VISIT: LODGING FEES	1 JO	B 561.00	561.00
4-1	EXPENSES INCURRED FOR SITE VISIT: MEAL FEES	1 JO	B 131.42	131.42
5-1	EXPENSES INCURRED FOR SITE VISIT: MILEAGE FEES	1 <b>JO</b>	B 70.20	70.20

2,013.22 Sub-total 0.00 Est. tax

OPEN

Page

Total Requisition Amount: 2,013.22

PREPAY ATTACHED INVOICE 23688 -PLEASE SET UP 2 WAY MATCH

Acct Fd 5890 12 
 Org
 Prog
 Sub
 Proj

 FL.VI.SWPA
 12050
 00000
 484Y
 <u>BU</u> <u>Amount</u> 2,013.22 GENFD

Purchases Charged to Catagorical Programs, Grants or Special Project.

Program Name: SWP - MLT Project Grant: 484Y

Program Director: Vicky Maryatt Program Goal: SWP goals 1, 7 and 11

Approval Signature	Approval Signature	Approval Signature



### 5600 N River Road, Suite 720, Rosemont, IL 60018 F.E.I.N. #36-2789792 P

# **Invoice**

Phone # (773) 714-8880	Fax# (773) 714-8886
( -)	

Invoice # Date 5/20/2019 23688

Program Director, MLT Program
Folsom Lake College - Los Rios C Coll
10 College Parkway
Folsom, CA 95630

PO#	Terms	Due Date	Check #	Date Paid
	Net 60 DAYS	5/20/2019		09/04/2018

Quantity	Quantity Description			Amount	
	Preparation Fee for Site	Preparation Fee for Site Visit.			500.00
	(PLEASE NOTE: FEE ON-SITE VISIT). Actual cost of site visit Itemized statement of a Travel Lodging Meals Mileage  To pay by Credit Care Email: accounting@n	e Visit.  MUST BE RECEIVED  for renewal of accredit authorized expenses incompleted according to the control of	ation of your Progra urred: owing: 14-8886		750.60 561.00 131.42 70.20
	Security Code				
	Expiration date (MM/	YYY)/			
	Type(circle one) VIS	SA MC AMEX			
	Signature				
	Full Name (printed) o	n Credit Card			

Make all checks payable to: NAACLS AND REMIT TO: 27321 Network Place CHICAGO, IL 60673-1273 THANK YOU FOR YOUR CONTINUING SUPPORT IN ACCREDITATION!!!!

Total	\$2,013.22
Payments/Credits	\$0.00
Balance Due	\$2,013.22