

COMPLETED

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

P.O. No. F 4093

Date 01/21/2022

LIMITED PURCHASE ORDER
(Not to Exceed \$1000.00)

VENDOR NAME AND ADDRESS: Valsoft Corporation, Inc. dba SARS Software Products 7405 Transcanada Hwy #100 Montreal, Quebec, H4T 1Z2		DELIVERY INSTRUCTIONS: <input type="checkbox"/> Deliver to Address Below (Check one) <input type="checkbox"/> Will Call FLC	
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ITEM	DESCRIPTION GIVE COMPLETE DESCRIPTION, INCLUDING CAT. NO. & SIZES	ORDERED			UNIT PRICE	TOTAL
		QUANTITY	UNIT	STOCK NO.		
1	eSARS: Customize eSARS Specialty Group Page	1	hours		\$300	\$300
2	1 hr @ \$300/hr					
3						
4	PAID					
5	CHECK #: 0094825279					
6						
7	DATE: 3-15-22					
8	AMOUNT: 300.00					
9	VOUCHER#: F4093					
10						

Purchases Charged to Categorical Programs, Grants or Special Projects This purchased is in compliance with the requirements of: SEAP		SUB-TOTAL SALES TAX TOTAL (Not to Exceed \$1000.00)	\$300.00
Program Name Molly Senecal	For grants/special projects 570B		
Program Director/Coord. Signature <i>Molly Senecal</i>	Project/Grant Number 570B		
Program Goal/Objective Number/Explanation			

VENDOR: Reference P.O. number on all invoices and packing slips. Total invoice may not exceed \$1000.00 including tax and shipping costs. Mail invoices in duplicate to: Los Rios Community College District, Accounting Department, 1919 Spanos Court, Sacramento, CA 95825.

I hereby certify the items/services listed above shall be obtained in accordance with District Policy, Conflict of Interest Code, P-8631 Section 3.0., and all other applicable district, state, and federal policies, rules, regulations, and laws.

Alina Kravchuk REQUESTED BY:	01/21/22 TYPED/PRINT DATE	GENFD / 5600 / 12 / FL.VS.SEAP Bus. Unit Account Fund Org	Received by _____ Date _____
Alina Kravchuk REQUESTED BY:	01/21/22 SIGNATURE DATE	63100 / 00000 / 2022 / 570B Program Sub-Class BY Proj/Grnt	\$ 300.00 Amount
<i>Molly Senecal</i> APPROVED:	1/21/22 DEAN OR OTHER AUTHORIZED SIGNATURE DATE	Bus. Unit Account Fund Org	\$ _____
APPROVED:	VICE PRESIDENT, ADMINISTRATION DATE	Program Sub-Class BY Proj/Grnt	Amount



Valsoft Corporation, Inc. dba SARS Software Products
7405 Transcanada Hwy #100
Montreal, Quebec, H4T 1Z2
Office: (415) 226-0040
Fax: (415) 226-0038
HQ: (514) 316-7647
Email: accounting@sarsgrid.com

Invoice

INVOICE #: INV-001279-SARS
DATE: 01-20-2022

Billing Address

Folsom Lake College
1919 Spanos Court
Sacramento, CA 95825

CUSTOMER REFERENCE		PAYMENT TERMS	DUE DATE
		Net30	02-19-2022
QTY	DESCRIPTION	UNIT PRICE	AMOUNT
1	eSARS: Customize eSARS Specialty Group Page 1 hr @ \$300/hr	\$300.00	\$300.00
		SUBTOTAL	\$300.00
		SALES TAXES	\$0.00
		TOTAL	\$300.00
		Invoice Currency	USD

ACH PAYMENTS

Institution: Valley National Bank
Routing: 021201383
Account: 42083435

or CHEQUES must be made payable to Valsoft Corporation Inc.