

COMPLETED

P.O. No. F4538

Date 5-3-22

LIMITED PURCHASE ORDER
 (Not to Exceed \$1000.00)

VENDOR NAME AND ADDRESS: THE HOME DEPOT PRO 2675 E. BIDWELL ST FOLSOM, CA 95630	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	WATER FOR API CELEBRATION 5-7-22 - INV # 4380864	1	LOT		385.12	385.12
2						
3						
4	PAID					
5						
6	CHECK #: 94827157					
7	DATE: 5-12-22					
8						
9	AMOUNT: 385.12					
10	VOUCHER#:					

Purchases Charged to Categorical Programs, Grants or Special Projects
 This purchased is in compliance with the requirements of:
SEAP
 Program Name: Kellie Butler For grants/special projects 570A
Program Director/Coord. Signature Project/Grant Number
Student Equity and Achievement
Program Goal/Objective Number/Explanation

	SUB-TOTAL	
	SALES TAX	
	TOTAL (Not to Exceed \$1000.00)	\$ 385.12

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.

JENNIFER TAYLOR 5-3-22
 REQUESTED BY: TYPED/PRINT DATE

JENNIFER TAYLOR 5-3-22
 REQUESTED BY: SIGNATURE DATE

APPROVED: DEAN OR OTHER AUTHORIZED SIGNATURE DATE

APPROVED: VICE PRESIDENT, ADMINISTRATION DATE

Received by _____ Date _____

GENFD / 4500 / 12 / FL.VS.SEAP
 Bus. Unit Account Fund Org

63299 / 00000 / 2022 / 570A \$ 385.12
 Program Sub-Class BY Proj/Grnt Amount

Bus. Unit Account Fund Org
 / / / / \$

Program Sub-Class BY Proj/Grnt Amount



How doers
get more done.™

2675 EAST BIDWELL STREET
FOLSOM, CA. 95630 (916)983-0401

6675 00038 79319 05/03/22 09:08 AM
SALE CASHIER TAMMY

0000-999-899 WTR DEP 1.20 <A,U>
CASE WATER BOTTLE DEP 1.20
84@1.20 100.80N
0000-218-340 BOTTLE WATER <A>
1/2 LITER WATER 24PK
84@3.98 334.32N
MAX REFUND VALUE \$284.32/84

-----Cust. Satisfaction-----
334.32 Amount Off -50.00
MUST RETURN ALL ITEMS FOR A FULL REFUND

SUBTOTAL 385.12
SALES TAX 0.00
TOTAL \$385.12
XXXXXXXXXXXX1603 PROPURCHASE 385.12
AUTH CODE TJA331/4380864 TA

P.O.#/JOB NAME: B220061
<U> - NON-DISCOUNTABLE ITEM

6675 05/03/22 09:08 AM



6675 38 79319 05/03/2022 3792

RETURN POLICY DEFINITIONS

POLICY ID DAYS POLICY EXPIRES ON
A 1 90 08/01/2022

DID WE NAIL IT?

Take a short survey for a chance TO WIN
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

www.homedepot.com/survey

User ID: WTX 165602 158965
PASSWORD: 22253 158927

Entries must be completed within 14 days
of purchase. Entrants must be 18 or
older to enter. See complete rules on
website. No purchase necessary.