CITY COLLEGE OF SAN FRANCISCO
REQUISITION FOR SUPPLIES, SERVICES AND EQUIPMENT

FOR QUESTIONS, CONTACT: Linda Shaw PHONE NO: (415) 239-3303 EMAIL:

VENDOR NAME: Accrediting Commission for Community and Junior Colleges
OTHER: 10 Commercial Blvd, Suite 204
CITY: Novato STATE: CA ZIP: 94949

SHIP TO:
DEPARTMENT: Chancellor's Office CAMPUS: Ocean/Peninsula
STREET: 50 Peralta Avenue, E200
CITY: San Francisco STATE: CA ZIP: 94112

ATTACH ANY QUOTES, SCREEN PRINTS, OR CATALOG PAGES.

I certify that all orders or payment requested are for appropriate purpose and in accordance with provisions of the application and funding.

DEPARTMENT/PROGRAM SIGNATURE: [Signature] PRINT NAME DATE: [Date]

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<th>ITEM NO</th>
<th>QTY UNIT</th>
<th>COMMODITY CODE</th>
<th>DESCRIPTION</th>
<th>UNIT PRICE</th>
<th>EXTENDED AMOUNT</th>
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<td></td>
<td>DIRECT PAYMENT</td>
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<td>1306.03</td>
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<td></td>
<td>Board of Trustees Training</td>
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<td>July 10, 2012</td>
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SHIPPING CHARGE (IF ANY)

TOTAL OF ADDENDUMS 1306.03
SUB-TOTAL 1306.03
SALES TAX
GROSS TOTAL 1306.03

COLLEGE APPROPRIATION NUMBER

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<th>ORGN</th>
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- For amounts over $2,000 allow sufficient time for bid process.
- An "NSF" condition will delay your order.

Great Academic's Approval
ITS Approval

TRIPLICATE - TO DEPARTMENT FILE
City College of San Francisco
Dr. Pamila Fisher, Interim Chancellor
50 Peltier Avenue
San Francisco, CA 94112