INSTRUCTIONAL EQUIPMENT REQUEST FALL 2019-2020

IE #: \(\frac{\text{Internal Use}}{\text{U}(9 - 1)} \)
Total \$: \(\frac{1}{5} \) \(\frac{1}{2} \) \(\frac{3}{1} \)

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|---|---|---|
| Requester Name: Daniel Cearley | Division N | Name: SPLC |
| SUM | MARY INFORMAT | CION |
| | | |
| Title of Item: Anthropology Laboratory 1 | √laterials ———————————————————————————————————— | |
| Equipment Location Building: 1000 | Ro | oom: 1061 |
| Location and Delivery Comments: | | |
| | | |
| SECTION 1: EQUIPMENT DESCI | RIPTION | |
| The equipment is: A Replacement | | New Equipment/Technology |
| | | |
| Describe the specific equipment requested technology to LPC from what is currently | | to replace, upgrade or provide new |
| representing over 10% of enrollments in the (SLPC) division. In Fall 2018, the Anthropo space in Building 1000, room 1061. This spagreatly enhanced our ability to engage with to quickly access materials central to lecture experience. It is clear to our instructors that retention of information. In addition, it was also apparent that there win 2017/2018. This request is designed to up on a certificate program in Cultural Resourc learning outcomes central to Anthropology. New equipment items overlooked in previou 1. Secondary battery for Nikon camera 2. Secondary battery for Total Station Laser | ace is a dramatic improve students. A dedicated laber topics moving lectures from the by having a robust array of the state and set the framework and set the framework management (CRM) and as EIR and will allow unit | ly moved to a new laboratory/lecture ement from our previous location and has oratory space has allowed our instructors from a theoretical discussion to a tactile of teaching materials this has improved and materials overlooked in our initial EIR rk for expanding our curriculum focused and fortifying our program student enterrupted periods of equipment use: |
| Items considered new equipment and supplication fundamental principles of artifact cataloging materials/collections: | | |
| 3. Archival releasable plastic storage bags | RECEIVED Las Positas College | RECEIVED |
| 4. Archival paper bags5. B-72 Conservation polymer | SEP 2 0 2019 | SEP 3 0 2019 |
| 6. Glass jars for soil experiments 7. Permanent Marker | Administrative Services Office of the Vice President | VP ACAD TOSCOTAVICES LAS PROPERS COTAVICES |

8. Plastic Trays

SECTION 1: EQUIPMENT DESCRIPTION (contd)

If applicable, describe the legal requirement, mandate, or safety concern for purchase of this equipment, making specific reference to the legal requirement or regulation:

The only safety concern will be the use of the B-72 polymer, which will arrive in a dry crystal form, however this will be dissolved in acetone in different ratios depending upon the application. The anthropology lab currently does not have a secure cabinet for volatile liquids and will need to be stored in another campus location when not in-use. A proper location that could serve as its repository would be in appropriate cabinets within the automotive program, chem laboratory, or biology labs.

SECTION 2: LPC MISSION STATEMENT AND LPC PLANNING PRIORITIES

LPC MISSION STATEMENT:

LPC is an inclusive learningcentered institution providing educational opportunities and support for completion of students' transfer, degree, basic skills, career-technical, and retraining goals.

LPC PLANNING PRIORITIES:

- Accreditation: Establish regular and ongoing processes to implement best practices to meet ACCJC standards.
- Curriculum: Provide necessary institutional support for curriculum development and maintenance.
- Tutoring Services: Expand tutoring services to meet demand and support student success in Basic Skills, CTE, and Transfer courses.
- Professional Development: Coordinate available resources to address current and future professional development needs of faculty, classified professionals, and administrators in support of educational master plan goals.

Specify how the equipment supports LPC's Mission Statement and Planning Priorities:

This request is targeted towards our biological anthropology, archaeology, and forensic courses which comprise the majority of our 36 sections. These are general education courses as part of their Life Science and Social Science requirements for transfer and AA-T. This request continues the effort to offer the most current materials to support the student's completion of basic skills and general education courses.

These materials directly aid in full filling LPCs mission in as "an inclusive learning-centered institution providing educational opportunities and support for completion of students' transfer, degree, basic skills, career-technical, and retraining goals."

These materials offer a powerful mechanism for explaining the scientific method and addresses the mission of LPC to support "courses, programs, disciplines, modes of delivery, learning communities, accounting for varying skills levels, creative and critical thinking, and having necessary and specialized facilities."

In addition, these \(\) offer alternatives to traditional modes of learning can help address one of the main planning priorities, specifically to "Increase student success and completion through change in college practices and processes".

SECTION 3: EDUCATIONAL ITEMS – PROGRAM REVIEW

Specify the educational programs this equipment supports:

The equipment and teaching materials listed in this request will directly support the Anthropology Program.

It may also provide support to ancillary programs such as Administration of Justice, Geology, and Geography. The range of materials will provide a solid basis to enhance exercises in Forensic Anthropology, a course cross-listed with Administration of Justice, and allow for future curriculum development to include a forensic anthropology lab course.

There is significant cross-pollination between archaeology and geology with requested equipment devoted to soil documentation and analysis.

In a similar manner, students pursuing an emphasis in archaeology are encouraged to take courses in geography and the total station mapping equipment will create opportunities for geography students to train in survey techniques.

This request also includes support for artifact photography, another program that anthropology students are encouraged to enroll.

If this equipment is included in your Program Review, please include the exact wording. If equipment is not included, explain why:

2017 Program Review

- G. Long Term Planning.
- 1. The laboratory classroom scheduled to come on line next year will require equipment for supporting our laboratory exercises. Section F details a number of items that should be a priority. If these items are not acquired, other sources of funding must be identified.
- 2. The new laboratory space will provide support for the forensic anthropology, archaeology lecture, and archaeology field courses. Photographic equipment, reference scales, and a desktop photographic suite must be acquired in order to assure the success of students in these courses.
- G. Obstacles: What obstacles has your program faced in achieving plans and goals?
- profiles

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 3 anotes

 3 5. From last year: "The Program has yet to identify a steady budge needs. This includes common expendable items such as paper filters, and PTC strips. For the archaeology lecture and permanent markers, and raw obsidian are used on a regu

pags,

SECTION 4: TEACHING AND LEARNING

Describe in detail the impact this equipment will have on teaching:

Each of these three items will have an immediate impact on the ability to teach. The back-batteries for the camera and Total Station are essential to ensuring that teaching is not interrupted. The remaining supplies will allow instructors to integrate a broader range of laboratory exercises for the cataloging artifacts and documentation of forensic evidence. This is a fundamental part of archaeology that up until this point has been carried out in very limited fashion with instructors purchasing small amounts of materials with their own monies.

Describe in detail the impact this equipment will have on learning:

These three items will undoubtedly increase the ability of students to learn more effectively. In contrast to a lecture format, these materials allow students to interact in a tactile manner and create a unique hands-on experience. It is well understood that students incorporate and retain information more successfully if a variety of methods are employed, namely in an audio, visual and tactile manner. This model of learning-by-doing will certainly have a broader impact than a strictly lecture f

Each academic year, this equipment will impact: 30 # of classes/sections 1300 # of students

SECTION 5: OUTCOMES (SLOs)

Using your documented SLOs, specify how the equipment will enable student learning outcomes to be achieved.

These materials will directly address both our program and course level SLOs. These materials will reinforce the concepts related to the scientific method. It will allow students to describe, sort, measure, and compare artifacts and forensic evidence. It will also add an additional level of learning by interacting with a tactile experience.

Program SLOs

These materials and resources presented provide very direct means to address the main SLOs at the program level: "Students will be able to use anthropological research methods to gather data (including research in contemporary journals, field work, and the systematic analysis of findings)."

At the course level, these materials will primarily benefit ANTR 1L, 2, 13, and 2L. Each of these courses plan SI Og that invalve analyzing data for 2 and 21 it foregoe on "theory to interpret archaeological de

What are the consequences related to learning outcomes if request is not funded?

Failure to secure these resources would significantly hinder our ability to lead students to success in the above-noted SLOs. There are direct implications for ANTR 2 and 2L course, which cannot run without the laboratory and field equipment specified in this request. Further, lacking this equipment for hands-on training, we cannot hope to prepare students for careers in the field.

| SECTION 6: TOTAL COST OF OWNERSHIP (FINANCIAL & SUSTAINABILITY) |
|--|
| What is the potential life span of the requested equipment? |
| The batteries have a 3 to 5 year life span, however, depending upon the useage this can be significantly extended. The plastic bags are archival and if not exposed to UV can have a significant life span. In a similar way, the paper bags can also have a significant life span if properly stored. The storage jars with metal lids also will be leveraged for years depending upon care and storage. The permanent markers are single use. |
| If new storage is needed what are the storage requirements, location requirements, and costs associated with the new equipment: (NOTE: Specific storage costs should be detailed in the "Part A: Initial Start-up Costs" section below.) |
| n/a |
| If this equipment replaces old equipment but the old equipment will not be retired, are there on-going storage requirements, location requirements, and costs associated with the old equipment? If so, provide details. |
| n/a |
| If your proposed equipment will require assembly or installation, please explain what is required, who will perform it, and what the cost will be |
| n/a |
| |
| What will be required to maintain the equipment, such as regular servicing or upkeep? (Specific on-going costs should be detailed in the " <u>Part B: On-Going Annual Operating Costs</u> " sections below as applicable.) |
| n/a |
| |
| Explain how this equipment meets or exceeds basic sustainability efforts and/or provides renewable resources to the college: |
| Of the items requested, the batteries, B-72, and permanent markers are not necessarily sustainable in the long term. Upon reflection there are vegetable based markers which may be a solution in the future. The batteries themselves are rechargeable however, will need to be replaced at some point. The Glass jars, plastic bags, and even the paper bags can be re-used if properly handled and are items that are recyclable. The paper bags are made from recyled paper. |

SECTION 6: TOTAL COST OF OWNERSHIP (contd)

Part A: Initial Start-up Costs

| <u> Item</u> | Cost | <u>Comments</u> |
|-------------------------------|-------------|-----------------|
| Equipment or Materials | 1,589.27 | |
| Taxes (9.5%) | 150.98 | |
| Shipping or Delivery Charge | 132.05 | |
| Installation Costs * | | |
| Miscellaneous Costs: | | |
| Facilities Modifications | | |
| Operator Training | | |
| Maintenance & Repair Training | | |
| Storage | | |
| Other: | | |
| Vendor Discount | | |
| Grand Total: | \$ 1,872.30 | |

^{*}For items requiring installation, requesters are required to check with District Purchasing (Victoria Lamica) regarding District policies.

Part B: On-Going Annual Operating Costs

| <u>Item</u> | Cost | Comments | | | |
|--|------|----------|--|--|--|
| Annual Service or Maintenance | | | | | |
| Estimated Parts Replacement Per Year | | | | | |
| Outside Standardization or Calibration | | | | | |
| Costs | | | | | |
| Storage Costs | | | | | |
| New Supply Costs | | | | | |
| Miscellaneous Costs: | | | | | |
| Maintenance & Repair Labor | | | | | |
| Other: | | | | | |
| Annual Operating Costs: | | | | | |

Indicate the source of funding for on-going annual operating costs:

| SECTION 6: TOTAL COST OF OWNERSHIP | P (contd) |
|---|--|
| Part C: Incremental Labor Costs | |
| <u>OPERATOR</u> : | |
| Indicate the key operator: | |
| Is this in their current scope of duties? | |
| Indicate cost to train key operator (include in Initial Sta | art-up Costs above): |
| Indicate amount of time per month key operator will us | e equipment: |
| MAINTENANCE & REPAIRS: | |
| Indicate the person performing maintenance and repair | rs: |
| Is this in their current scope of duties? | |
| Indicate cost to train for maintenance and repairs: | |
| Indicate amount of time per month maintenance will be | required: |
| | |
| APPROVALS | |
| Funded requesters will be expected to respond to a brief | FRAC feedback survey by a requested deadline. |
| Requests for computer-related equipment and print LPC IT Department. | nters must be reviewed and signed off by the |
| * Requests that require M&O assistance with assem | bly or installation must be signed off by M&O. |
| SIGNATURES: | 9/13/2019. |
| Requester | Date |
| Stilm | 9/02/19 N/A |
| IT Approval | Date |
| M&O Approval | 9/24/19 N/A |
| Col 111 | |
| Division Dean | 7/17/19 Date |
| Lish Whol | 9/28/19 |
| Vice President | Date |

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LAS POSITAS COLLEGE Equipment, Apparatus and Service Requisition

45.00 21.00 120.00 30.00 50.40 59.40 124.05 111.00 29.00 116.50 840.00 1,546.35 1,305.80 RETURN COPY of REQUISITION TO: FOR OFFICE USE ONLY Air 8 \$ 8 8 S 8 8 8 S 8 8 8 8 8 8 \$ 8 4 TOTAL COST **UNIT PRICE** Shipping (if available): 48 1.05 36 1.65 Jes, 111 21 29 45 9 15 40 21 **Business Office** QTY DATE REQUIRED | DIVISION/ DEPARTMENT | For inventory purposes include room # where Presiden Subtotal LIND Тах equipment will reside: 1061 Deliver To, include room # (optional): Original invoices and receipts must be attached for payment. Include current taxes unless incorporated in price. PROGRAM BT# (PRODUCT, TYPE, SIZE, COLOR, STOCK NUMBER) SPLC ACCT S-17984M S-20658 S-19538 S-1308 S-1309 S-6912 S-1307 S-1907 H-286 Supervisor/ Coordinator/ Director ORG FOR REIMBURSEMENT: List payee name & ssn 13-Sep-19 DATE WRITTEN Archival resealable plastic bags 4x6 Sharpies (Permanent Markers BLK) Paper bags small 6 x 3 5/8 x 11" Uline al resealable plastic bags 9x12 al resealable plastic bags 3x5 al resealable plastic bags 6x9 Vendor Information/ Remit To: per bags large 12 x 7 x 17" Glass Beakers (3" 16 oz.) Plastic ESD trays 18x14" **ACCOUNT#** NAME OF STAFF MEMBER SUGGESTED VENDOR **APPROVALS** Daniel Cearley DESCRIPTION Comments:

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(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information,

Give Form to the requester. Do not send to the IRS.

| | 1 Name (as shown on your income tax return). Name is required on this line; do | not leave this line blank. | | | | | | | | | - |
|--|--|---|--|------------------|--------------------------|--------------------------|----------------|---|-----------|----------|------|
| 1 | ULINE, INC. | | | | - | | | | | | |
| | 2 Business name/disregarded entity name, if different from above | | | | | | | | | | |
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| page 3. | following seven boxes. | | | | | | | 4 Exemptions (codes apply only to certain entitles, not individuals; see instructions on page 3): | | | |
| e. ns on | ☐ Individual/sole proprietor or ☐ C Corporation ☑ S Corporation single-member LLC | Partnership | ☐ Trust/e | estate | Exer | npt payee | code | e (if a | ny) | 5 | |
| it & | ☐ Limited liability company. Enter the tax classification (C=C corporation, S=: | S corporation, P=Partnersh | nip) ▶ | | | | | | - | | |
| Print or type. Specific Instructions on page | Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tax put | of the single-member own m the owner unless the ow rposes. Otherwise, a single | ner. Do not oner of the e-member l | LLC is | cod | nption fro e (if any) | om F <i>A</i> | TCA | repo | rting | |
| - iji | Is disregarded from the owner should check the appropriate box for the tax | x classification of its owner | • | | Mont | s to accoun | le malni | ninod c | uleida | Iho II S | 9 |
| ğ | Under (see instructions) ► 5 Address (number, street, and apt. or suite no.) See Instructions. | Tr | Requester's | s name | | | | - | 7013700 | 170 0.0 | •/ |
| a) | PO BOX 88741 | 1 | toquestor | o manne | and ac | inings (o) | J. (1011) | •", | | | |
| Ø, | 6 City, state, and ZIP code | | | | | | | | | | |
| ı | Chicago, IL 60680-1741 | | | | | | | | | | |
| ŀ | 7 List account number(s) here (optional) | | | | | | | - | - | | |
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| The Real Property lies, the Person of the Pe | our TIN in the appropriate box. The TIN provided must match the name | e given on line 1 to avoi | d S | ocial s | ecurity | number | | | 272 | | |
| | withholding. For individuals, this is generally your social security number | | a | T | | | 7 | | | | _ |
| | nt allen, sole proprietor, or disregarded entity, see the instructions for P s, it is your employer identification number (EIN). If you do not have a nu | | a | | | | 7 | | | | |
| TIN, la | | ambon soo non to got | or | | | | 7 | - | | - 7- | |
| | f the account is in more than one name, see the instructions for line 1. | Also see What Name ar | nd E | mploy | er identification number | | | | | | |
| Numbe | er To Give the Requester for guidelines on whose number to enter. | | 3 | 6 | - 3 | 6 8 | 4 | 7 | 3 | 8 | |
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| | penalties of perjury, I certify that: | | | | | | | | | | |
| 2. I am | number shown on this form is my correct taxpayer identification numb not subject to backup withholding because: (a) I am exempt from back lice (IRS) that I am subject to backup withholding as a result of a failure | kup withholding, or (b) I | have not | been | notifie | d by the | Inte | | | | m |
| | onger subject to backup withholding; and | to report all interest of | dividend | 3, 01 (| 0, 110 , | i io iiuo | 101111 | ou ;; | 10 11 | at i c | •••• |
| 3. I am | a U.S. citizen or other U.S. person (defined below); and | | | | | | | | | | |
| 4. The | FATCA code(s) entered on this form (if any) indicating that I am exemp | t from FATCA reporting | is correc | t. | | | | | | | |
| you ha | cation instructions. You must cross out item 2 above if you have been no ve failed to report all interest and dividends on your tax return. For real esta tion or abandonment of secured property, cancellation of debt, contribution nan interest and dividends, you are not required to sign the certification, but | ate transactions, item 2 c ons to an individual retirer | does not a ment arrar | pply. I ngeme | For mo | rtgage ir), and ge | teres enera | it pai lly, p | d, aym | ents | JSe |
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| noted. | n references are to the Internal Revenue Code unless otherwise | Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) | | | | | | | | | |
| related | developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted beywere published, go to www.irs.gov/FormW9. | Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) | | | | | | | | | |
| | | Form 1099-S (proce | eds from | real e | state t | ransacti | ons) | | | | |
| | oose of Form | Form 1099-K (merch | hant card | and t | hird pa | rty netw | ork 1 | trans | actio | ons) | |
| Inform | vidual or entity (Form W-9 requester) who is required to file an atlon return with the IRS must obtain your correct taxpayer | Form 1098 (home m 1098-T (tuition) | | | st), 109 | 8-E (stu | dent | loar | inte | rest) | • |
| (SSN) | cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption | • Form 1099-C (cance | | | | | | | . 10 | | |
| taxpay | er identification number (ATIN), or employer identification number | • Form 1099-A (acquis | | | | | | 2.3 | • • | | |
| amour | o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information include but are not limited to the following. | Use Form W-9 only alien), to provide your | correct 7 | IN. | | | | | | | |
| | include, but are not limited to, the following. 1099-INT (interest earned or pald) | If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, | | | | | | | | | |

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PRICING REQUEST

REQUEST # 29255460

Thank you for your interest in Uline!

PROVIDED TO:

LAS POSITAS COLLEGE 3000 CAMPUS HILL DR

LIVERMORE CA 94551-7623

SHIP TO:

LAS POSITAS COLLEGE 3000 CAMPUS HILL DR

LIVERMORE CA 94551-7623

| CUSTOMER NUMBER | | NUMBER | SHIP VIA | REQUEST DATE | | | |
|-----------------|-----|-------------|--|--------------|------------|--|--|
| 11406645 | | 645 | DC LOGISTICS | 09/17/19 | | | |
| QUANTITY | U/M | ITEM NUMBER | DESCRIPTION | UNIT PRICE | EXT. PRICE | | |
| 40 | EA | S-19538 | ESD TRAYS - 18 X 14 X 1" | 19.30 | 772.00 | | |
| 2 | BD | S-20658 | RECYCLED GROCERY BAGS - 12 X 7 X 17", KRAFT | 60.00 | 120.00 | | |
| 2 | BD | S-6912 | HARDWARE PAPER BAGS - 6 X 3 5/8 X 11 ", #6 | 15.00 | 30.00 | | |
| 1 | СТ | S-1907 | 9 X 12" 2 MIL WHITE BLOCK RECLOSABLE BAGS | 111.00 | 111.00 | | |
| 1 | СТ | S-1309 | 6 X 9" 2 MIL WHITE BLOCK RECLOSABLE BAGS | 45.00 | 45.00 | | |
| 1 | СТ | S-1308 | 4 X 6" 2 MIL WHITE BLOCK RECLOSABLE BAGS | 29.00 | 29.00 | | |
| 1 | СТ | S-1307 | 3 X 5" 2 MIL WHITE BLOCK RECLOSABLE BAGS | 21.00 | 21.00 | | |
| 48 | EA | H-286BL | SHARPIE® MARKERS - BLACK | 1.05 | 50.40 | | |
| 36 | EA | S-17984M-W | STRAIGHT-SIDED GLASS JARS - 16 OZ, WHITE METAL LID | 1.65 | 59.40 | | |
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| | SUB-TOTAL | SALES TAX | SHIPPING/HANDLING | TOTAL |
|-----|-----------|-----------|-------------------|----------|
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LAS POSITAS COLLEGE Equipment, Apparatus and Service Requisition

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21.85 7.65 230.00 230.00 259.50 RETURN COPY of REQUISITION TO: FOR OFFICE USE ONLY Air 8 8 8 S 8 8 8 8 8 8 8 8 8 8 8 8 8 ₩ 230.00 TOTAL COST UNIT PRICE En Pl Shipping (if available): S Business Office QTY DATE REQUIRED | DIVISION/ DEPARTMENT | For inventory purposes include room # where Dean/ VP/ President Subtotal LIND Тах equipment will reside: 1061 Deliver To, include room # (optional): Original invoices and receipts must be attached for payment. Include current taxes unless incorporated in price. PROGRAM BT# Tiger#: TS58251 Mfr#: 733270 (PRODUCT, TYPE, SIZE, COLOR, STOCK NUMBER) SPLC ACCT Supervisor/ Coordinator/ Director ORG i-lon Battery for Builder 100-500 Total Stations **Tiger Supplies** 13-Sep-19 FOR REIMBURSEMENT: List payee name & ssn DATE WRITTEN FUND Vendor Information/ Remit To: NAME OF STAFF MEMBER **ACCOUNT**# SUGGESTED VENDOR **APPROVALS** Daniel Cearley DESCRIPTION Comments:

Form (Rev. October 2007) Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

| | Name (as shown on your income tax return) | | | | | | | | | | | |
|--|--|---------------------------------------|--|--|--|--|--|--|--|--|--|--|
| 0 | Tiger Supplies, Inc. | | | | | | | | | | | |
| מטפט טס | Business name, If different from above | | | | | | | | | | | |
| Print or type | Check appropriate box: Individual/Sole proprietor Corporation Partnership Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partner Other (see instructions) | Exempt payee | | | | | | | | | | |
| int | Address (number, street, and apt. or suite no.) | quester's name and | me and address (optional) | | | | | | | | | |
| 4 5 | 27 Selvage St. | | | | | | | | | | | |
| ; | City, state, and ZIP code | | | | | | | | | | | |
| ů | Figure 1 Irvington, NJ 07111 | | | | | | | | | | | |
| 0 | List account number(s) here (optional) | | | | | | | | | | | |
| Pa | art I Taxpayer Identification Number (TIN) | | | | | | | | | | | |
| Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3. Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter. Social security number Social security number | | | | | | | | | | | | |
| Pa | art II Certification | | | | | | | | | | | |
| Und | der penalties of perjury, I certify that: | | | | | | | | | | | |
| | The number shown on this form is my correct taxpayer identification number (or I am waiting fo | | | | | | | | | | | |
| 2. | 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and | | | | | | | | | | | |
| 3. | I am a U.S. citizen or other U.S. person (defined below). | | | | | | | | | | | |
| with For arra | rtification instructions. You must cross out item 2 above if you have been notified by the IRS the hholding because you have failed to report all interest and dividends on your tax return. For real remortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, cangement (IRA), and generally, payments other than interest and dividends, you are not required to yide your correct TIN. See the instructions on page 4. | estate transaction contributions to a | ns, item 2 does not apply. n individual retirement | | | | | | | | | |

U.S. person ▶ General Instructions

Signature of

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Sign

Here

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued)
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

An individual who is a U.S. citizen or U.S. resident alien,

Date ► 08/4/2016

- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United
- · An estate (other than a foreign estate), or
- · A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that Therefore, if you are a U.S. person that is a partner in a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity,

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LAS POSITAS COLLEGE Equipment, Apparatus and Service Requisition FOR REIMBURSEMENT: List payee name & ssn.

| ONLY | ON TO: | Air | 13.98 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | ı | J | 13.98 | 1.33 | 7.90 | 23.21 | | | |
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| FOR OFFICE USE ONLY | f REQUISITI Ext#: | | ↔ | \$ | 8 | & | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | | |
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| | ere | QTY | 1 | | | | | | | | | | | | | | tal | | ing (if av | | Business Qffice | X | ent |
| | w # wp | TINU | | | | | | | | | | | | | | | Subtotal | Тах | Shippi | | Busine | m | / President |
| Conservation Support Systems | DATE REQUIRED DIVISION/ DEPARTMENT For inventory purposes include room # where SPLC equipment will reside: 1061 | (PRODUCT, TYPE, SIZE, COLOR, STOCK NUMBER) | <u>CM-27200-0010</u> | | | | | | | | | Deliver To, include room # (optional): | | | | | Marke 4 1 1 0 1 C | SER 2 0 2019 | VP ACAL TO EERVICES LAS POST AS COLUEGE | Original invoices and receipts must be attached for payment. Include current taxes unless incorporated in price. | ORG ACCT PROGRAM | | Supervisor/ Coordinator/ Director Dean/ VF |
| Conservation | DATE WRITTEN 13-Sep-19 | (PRODUCT, T | 2 | | | | | | | | | emit To: | | | | | | | | ts must be attache | FUND | | Supervisor/ Co |
| SUGGESTED VENDOR | NAME OF STAFF MEMBER Daniel Cearley | DESCRIPTION | Acryloid (Paraloid) B-72 | | | | | | | | | Vendor Information/ Remit To: | | | | | Comments: | | | Original invoices and receipt | ACCOUNT # | APPROVALS | |

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LAS POSITAS COLLEGE Equipment, Apparatus and Service Requisition

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39.49 39.49 3.75 43.24 RETURN COPY of REQUISITION TO: FOR OFFICE USE ONLY Air 8 8 8 S ₩ S 8 8 8 8 8 8 8 8 8 8 8 S TOTAL COST 39.49 **UNIT PRICE** Shipping (if available): S **Business Office** QTY Dean/ VP/ President DATE REQUIRED | DIVISION/ DEPARTMENT | For inventory purposes include room # where Subtotal LIND Тах equipment will reside: 1061 Deliver To, include room # (optional): Original invoices and receipts must be attached for payment. Include current taxes unless incorporated in price. PROGRAM MFR # 27126 BT# (PRODUCT, TYPE, SIZE, COLOR, STOCK NUMBER) SPLC ACCT **B&H # NIENEL14A** Supervisor/ Coordinator/ Director ORG argeable Lithium-lon Battery (7.2V, 1230mAh) **BH Photovideo** FOR REIMBURSEMENT: List payee name & ssn. 13-Sep-19 DATE WRITTEN FUND Vendor Information/ Remit To: **ACCOUNT**# NAME OF STAFF MEMBER SUGGESTED VENDOR **APPROVALS** Daniel Cearley DESCRIPTION Comments:

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