

Check Number: 64855  
Check Date: 8/14/2009

Vendor: CALICA  
Merge #: 81,643

California Construction Authority  
1776 Tribute Road. Suite 220

Sacramento  
CA 95815

Invoice #	PO #	Date	Description	Balance	Discount	Withheld	Net Pay
CR-56163		8/14/2009	Construction Fund - Capital Projects	7,000,000.00	0.00	0.00	7,000,000.00
Totals:				7,000,000.00	0.00	0.00	7,000,000.00

32nd DISTRICT AGRICULTURAL ASSOCIATION 88 Fair Drive Costa Mesa, California 92626



# PURCHASE REQUISITION

*Requestor fills in the shaded areas*

8/14/09  
Date

Dena Heathman  
Person making request

Department  
8/17/09  
Date Needed

Department to charge \_\_\_\_\_  
1820-00-09314  
Account # to charge

Supervisor Approval \_\_\_\_\_

Management Approval For Bld (if required) \_\_\_\_\_

Management Approval

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Approved \_\_\_\_\_ Date \_\_\_\_\_

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Approved \_\_\_\_\_ Date \_\_\_\_\_

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Approved \_\_\_\_\_ Date \_\_\_\_\_

- State Contract
- Delegation
- Opportunity Purchase
- Credit Card
- CFSA
- Standard 210 / 213
- Fair & Reasonable/Catalog/Controlled/Historical Pricing
- Approved for Check Request/Petty Cas up to \$ \_\_\_\_\_
- Date \_\_\_\_\_

Purchasing Officer \_\_\_\_\_

Contract Number: (if applicable) \_\_\_\_\_

Job Description: \_\_\_\_\_

VENDOR NAME AND ADDRESS ..... California Construction Authority  
 Purchasing Agent \_\_\_\_\_  
176 Tribute Road Suite 220  
Sacramento, CA 95815  
 Expected Delivery Date \_\_\_\_\_

MARK BOX "S" IF SMALL BUSINESS, "DV" IF DISABLED VETERAN           

PERSON QUOTING ..... \_\_\_\_\_

TELEPHONE NUMBER ..... \_\_\_\_\_

FAX NUMBER ..... \_\_\_\_\_

QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL COST	UNIT PRICE	TOTAL COST	UNIT PRICE	TOTAL COST
		<u>CCA Construction Fund</u>						
		<u>To fund capital projects</u>						

F.O.B. DESTINATION

FFA ORIGINATING POINT

PP&G

SUBTOTAL ▶ \_\_\_\_\_

TAX ▶ \_\_\_\_\_

COST TOTAL ▶ 7,000,00.00

Order Placed \_\_\_\_\_ Date \_\_\_\_\_

Requisition # **56163**