

Clause	Description	Text	Use
5 W'S	Who, What, Where, When, Why	Audit reminder: The approving authority may NOT be the same person as the "Official Host", but should be the supervisor (or higher level) of the official host. The official host must sign a certification that entertainment expenses were incurred for official University business. Name and Dept. of the "official host" purposes Who (How many?) Must provide guest list and explanation of business relationship between guest(s) and the University Faculty-, Staff-, Students; What, Where, When, Why (purpose) NOTE: If this is a reimbursement, complete the "Entertainment and Student Programming Reimbursement Form")	Payment
ACCEPT	Vendor acceptance copy attached	Vendor acceptance copy attached. Please sign & return to the UCSC Purchasing Office within 10 days.	Miscellaneous
ADMJM	delete		Office of Record
ADV PAY	Advance payment will be made	Paper work has been initiated for advance payment of your order/deposit. Payment will be made on university check to be issued within 7-10 days.	Payment
ALCOHOL	No alcoholic beverages permitted	No alcoholic beverages permitted on this order.	Alcohol
ALT INV	Alternate Invoice Address	Important Note Regarding Invoices -- Send To:University of California (Dept.Name/location) 1156 High street Santa Cruz, CA 95064 Attn:	Payment
AMORTIZE	Amortization Schedule Address	Send amortization schedule itemizing the principal and interest for each payment over the term of the lease to: UCSC Accounts Payable 1156 High Street, Santa Cruz, CA 95064 , ATTN: Anne Olson,	Installment - Purchase
APDX.A	Appendix A applies	Terms and conditions of the University of California Appendix incorporated herein by reference (copy available upon request).	Purchasing order \$2500 +
APLORDER	Apple Order	Attn:Randy Boggs FAX 512-674-2973, Acct: 52006011	Purchasing
APPROX	Figure is an approximation only	This figure is an estimated total based on the rates and estimated usage for the term of this purchase order. This figure is an approximation only and should not be construed as a definite commitment.	Miscellaneous Blankets
APSUE	Apple computer internal note	Ordered on line date Web Ref# Requester Name	DSM Central Purchasing
ARB	delete		

Clause	Description	Text	Use
ARTSGW	ARTS DIVISION: GAYLE BERRY	NAME: Gayle BERRY, SERVICE CENTER: ARTS DIVISION UNIT PHONE X9-1324	Office of Record
ARTSJDF	ARTS DIVISION: JENNA DIFEO	NAME: Jenna Difeo, SERVICE CENTER: ARTS DIVISION UNIT PHONE X9-3416	Office of Record
ARTSLM	ARTS DIVISION: LYNDA MARKS	NAME: Lynda Marks, SERVICE CENTER: ARTS DIVISION UNIT PHONE: X9-4973	Office of Record
ARTSPJ	ARTS DIVISION: PEGGY JONES	NAME: Peggy Jones, SERVICE CENTER: ARTS DIVISION UNIT PHONE: X9-2534	Office of Record
ATF PO	AFTER THE FACT P.O. / VENDOR CLAUSE	<p>IMPORTANT NOTE TO VENDOR REGARDING PROVISION OF GOODS AND/OR SERVICES PRIOR TO RECEIPT OF OFFICIAL UNIVERSITY OF CALIFORNIA PURCHASE ORDER:</p> <p>All University of California purchases requires a valid University purchase order PRIOR to the execution of services or shipment of goods.</p> <p>Acceptance of orders without the appropriate purchase order # is done at the vendor's risk. Such orders may result in delayed payment or referral of the charges to the individual who placed the order.</p>	
AUDIT	Order is subject to State audit	This order shall be subject to the examination and audit of the Auditor General of the State of California for a period of three years after final payment under this order. The examination and audit shall be confined to those matters connected with the performance of the contract, including, but not limited to, the costs of administering the contract.	Audit all 19900 funded po's >10K
AUTO	Auto purchase header text	Attn: FAX: Please provide vehicle as shown below for Fleet Services, University of California Santa Cruz as shown on CA State Agreement 1-01-23-20-02s State Stock NO Item #. Appendix A terms and conditions Apply. DELIVER VEHICLE to address shown above: shown as SHIP TO address. REGISTRATION: University will register all vehicles. Please forward all registration documentation to: UCSC Fleet Services Attn: Ken Taul 1156 High Street Santa Cruz. SEND INVOICE TO: USCS FLEET SERVICES ATTN: TIM BARNCastle-HILL, 1156 HIGH STREET SANTA CRUZ, CA 95064 Payment Terms: \$500 discount per vehicle for payment within 20 days.	

Clause	Description	Text	Use
BLANK			Miscellaneous
BLKTHEDR	Unit Blanket header Text Clauses	<p>This blanket purchase order provides the miscellaneous goods and/or services itemized below for the UCSC _____ Department for the period July 1, 2001 through June 30, 2002. This order cancels and supersedes prior year purchase order P_____.</p> <p>IMPORTANT NOTE REGARDING INVOICES--SEND TO: University of California, (Department Name), 1156 High Street, Santa Cruz, CA 95064 ATTN:(Department Contact)</p> <p>Terms and Conditions of the University of Calif. Appendix A incorporated herein by reference. Copy Available upon request.</p> <p>When prior year purchase order exists, all prior terms and conditions remain unchanged unless otherwise indicated in this purchase order.</p>	Unit Blanket
BLKTLINE	Unit Blanket Line Item Text Clauses	<p>This(ese) figure(s) is(are) an estimated total based on the rates and estimated usage for the term of the contract and should not be construed as a definite commitment. Vendor certifies that the prices quoted are no higher than those quoted to any other customer including agencies of the U.S. Government. Freight charges in excess of \$500.00 require a copy of the actual freight bill to be included with the invoice. The University reserves the right to cancel this order at any time and without penalty.</p>	Unit Blanket
BLKTPO	Blanket PO Period of Time	This blanket purchase order covers the period _____ through _____.	Unit Blanket
BLKTRENU	Blanket Purchase Order Renewal	<p>CHANGE ORDER #__ TO BLANKET PURCHASE ORDER #B_____ to increase estimated expenditures for the extended period below; Change ending date from to 6/30/01 to read from 7/01/01 thru 6/30/02 .; Increase the estimated expenditures in the amount of \$ _____ .; IMPORTANT NOTE REGARDING INVOICES -- SEND TO: University of California, Department name, 1156 High Street, Santa Cruz, CA 95064, Attn: ; Terms and conditions of University of California Appendix A apply.; Unless otherwise indicated in this purchase order, all prior terms and conditions remain unchanged..</p>	Unit Blanket
BLKTUNEX	Blkt Header Text/Extension Division	See "BLKTHEDR" for text	UNEX

Clause	Description	Text	Use
BLT	delete		
BTBBJ	Bay Tree BKSTR: Bev Johnson	Name: Bev Johnson, Service Center: Bay Tree Bookstore, Unit Phone: X9-5387	
BTBJT	BAY TREE BKSTR: JANELLE TAYLOR	NAME: Janelle Taylor, SERVICE CENTER: BAY TREE BOOKSTORE, UNIT PHONE: X9-4844	Office of Record
BTBPP	BAY TREE BKSTR: PATTI McGILL	NAME: Patti McGill, SERVICE CENTER: BAY TREE BOOKSTORE, UNIT PHONE: X9-5179	Office of Record
BUS	Line Text for Bus Charters	NOTE: If more than one bus is chartered with identical itineraries, additional insurance is required. Contact Sue Miller at X9-2882. Charter of ____ bus(es) to transport approximately ____ travelers. Bus Charter Itinerary #: Dates of Charter: Pick up Location: Destination: Return date(s): Miles if quoted: Vendor selected from pre approved bus charters list.	
CANCEL	UCSC reserves the right to cancel	The university reserves the right to cancel this order at anytime and without penalty.	Miscellaneous
CANON	Canon Maintenance Blanket Txt	Full Service Maintenance for the copier described below: Model Number:, Serial Number:, Campus Location:, Contact Person/Phone:, Monthly/Quarterly Rate:, Per Copy Charge: Clauses: APPROX, and UNITBLKT.	Unit Blanket
CATSINV	Invoice Address for CATS	IMPORTANT NOTE TO VENDOR: SEND INVOICE TO -- University of California CATS Department 27 Communications Bldg. Santa Cruz, CA 95064 ATTN: Deidre Howell 831-459-2435	
CBODK	CHANCELLOR BUS OFF: DARLYNNE KIDDER	NAME: Darlynn Kidder, SERVICE CENTER: CHANCELLOR'S BUSINESS OFFICE, UNIT PHONE: X9-4325	Office of Record
CBOPH	delete		Office of Record

Clause	Description	Text	Use
CBOSA	CHANCELLOR BUS OFF	NAME: , SERVICE CENTER: CHANCELLOR'S BUSINESS OFFICE, UNIT PHONE: X9-2952	Office of Record
CERTIFY	Price is certified to be no higher	Vendor certifies that the prices quoted are no higher than those quoted to any other customer including agencies of the U.S. Government.	Miscellaneous
CHANGORD	Change Order Header Text	Change Order #__ to P_____ dated_____, to revise order as follows: (describe the change(s) TOTAL CHANGE ORDER INCREASE/DECREASE: \$ PREPARED BY/UNIT: EXTENSION: X9-	Change Order
CHECK	Lost / Stale dated checks	Lost / Stale Dated check cancelled on and reissued on Patty Davis AP X9-4797	
CLOSURE	Holiday 2000 closure	IMPORTANT NOTE TO VENDOR: Please note that UCSC will be closed during the period December 21, 2001 through January 1, 2002. Please do not ship goods to arrive during this period unless otherwise instructed. Normal receiving hours will resume on January 2, 2002.	Delivery
CONFIDEN	Confidential Transaction	This is a private and confidential transaction. Only those employees with a need to know should view this transaction. If you have any questions, please call Janet Lester at X9-4533.	Business Contracts <u>ONLY</u>
CONFRMG	Confirming Order	Confirming Order - Do Not Duplicate	Miscellaneous
CONSULT	Consulting Agreements	Terms and conditions of UCSC Consultant Agreement # _____ for the period _____ through _____ are incorporated herein by reference.	Consultant PO's
COPYRI2	Contractor Copyright Ownership	University and Contractor agree that Contractor will own the copyright to all copyrightable work(s) developed by Contractor as deliverables under Purchase Order No._____. However, Contractor hereby grants to University a perpetual non-exclusive, royalty-free, worldwide license to use and reproduce any and all such copyrightable works for educational and research purposes. Copyright warranty: Contractor represents and warrants that he/she/it has full power and authority to enter into this Agreement and to grant the rights granted in this Agreement; that all the Materials will be original except for material in the public domain and such excerpts from other works as may be included with the written permission of the copyright owners; that the Materials will not infringe any copyright or other intellectual property right and will not invade or violate any right of privacy, personal or proprietary	Contractor owns copyrights

Clause	Description	Text	Use
		right, or other common law or statutory right.	
COPYRIGHT	UC COPYRIGHT OWNERSHIP	<p>1. UC Copyright ownership: University and Contractor agree that University shall own, solely and exclusively, the copyright and all copyright rights to any copyrightable materials, including, without limitation, _____ (On the line above enter types of materials to be delivered, e.g. written materials, computer software, web pages, logos, videotapes, films, etc.) (collectively the "Materials") developed by Contractors as deliverables under the Purchase Order. Contractor is specifically obligated to assign all right, title and interest in any such copyright rights to the University. Copyright warranty: Contractor represents and warrants that he/she/it has full power and authority to enter into this Agreement and to grant the rights granted in this Agreement; that all the Materials will be original except for material in the public domain and such excerpts from other works as may be included with the written permission of the copyright owners; that the Materials will not infringe any copyright or other intellectual property right and will not invade or violate any right of privacy, personal or proprietary right, or other common law or statutory right. Acceptance Signature_____</p>	
CORDEL	Coordinate Delivery with	Please call 2 days prior to delivery to Coordinate with:	
CPTSINV	delete		
CRWCOLDM	CROWN COLLEGE: DARLENE MIYAKAWA	NAME: Darlene Miyakawa, SERVICE CENTER: CROWN COLLEGE ADMIN., UNIT PHONE: X9-5370	Office of Record
CRWCOLJW	CROWN COLLEGE: JOAN WEBBER	NAME: Joan K. Webber, SERVICE CENTER: CROWN COLLEGE, UNIT PHONE: X9-4392	Office of Record
CRWMERCA	CROWN-MERRILL: CHRIS ATTIAS	NAME: Christopher J. Attias, SERVICE CENTER: CROWN/MERRILL, UNIT PHONE: X9-3271	Office of Record
CRWMERJS	CROWN/MERRILL: JOANN SMILEY	NAME: JoAnn Smiley, SERVICE CENTER: CROWN/MERRILL, UNIT PHONE: X9-2891	Office of Record
CSCMC	COLLEGES SVC CTR: MAGGIE COLLINS	NAME: Maggie Collins, SERVICE CENTER: COLLEGES SERVICE CENTER, UNIT PHONE: X9-5771	Office of Record
DEA	DEA Registration	Coordinate with: Schedule of item being ordered:_____ Shipping address or PO must match DEA License. Schedule II requires DEA 222	

Clause	Description	Text	Use
		address on PO must match DEA License . Schedule II requires DEA 222 Form attached.	
DEL ADD	Delivery address different than Bill To	Note to vendor: Delivery address is different from billing address.	Delivery
DEL UCR	Deliver only to Central Rec.	The above goods will be accepted only if delivered to Central Receiving, 1156 High Street, Santa Cruz, CA 95064, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday.	Delivery
DEL USER	End User Campus Address/Header Text	Attn: UC RECEIVING, Deliver this shipment directly to --, End User Name/Phone:, Building Name:, Room Number:	Internal use for campus Delivery address
DELIVERY	delet		Delivery
DELL	Dell computer orders	Attn: Leighan Pickard FAX 800-365-5329 Please Provide Dell computer products for the University of California Santa Cruz as shown below on quote #. Universiy Agreement 690/OP/137 Terms and Conditions apply. Add yr 2000 clause. Add warranty in line text.	
DLGCP	PO Documentation: Donna Gorman	Date: Faxed Quote #: For technical questions or specs information contact PI / Requestor: Buyer: Donna Gorman X9-2188	
DOC	Documentation has been forwarded	Supporting backup documentation, including quotation(s) when required, has been forwarded to Central Purchasing via fax to X3300 or via campus mail.	
DOOR	Direct Pay Text: Office of Recorde	Name, Service Center, Unit phone, Comments	Purchasing
DSM1	Please provide	Please provide service/supply for the University of California Santa Cruz, as shown below. Appendix A terms and conditions Apply	Central Purchasing
DSMBOAT	Yacht Harbor Address	*** Special Delivery Instructions *** Please contact Phil Vandenburg prior to delivery @ 831-425-1164 C/O Santa Cruz Harbor UCSC Boat Center F Doc Santa Cruz, CA 95060	Deliver to Harbor, Boat Center

Clause	Description	Text	Use
DSMBUS	Bus Header	Attn: Please Provide bus charter service for University of California Santa Cruz, as shown below. Vendor is on approved vendor list.	
DSMINS	DSM insurance ok blanket	Certificate of Insurance on file with Central Purchasing is current. Insurance expires No work is to be preformed against the Purchase Order unless the current certificate is on file.	
DSMINSRE	Insurance Regents added clause	Certificate of insurance must add the University as an additional insured to read as follows: "Regents of the University of California, its Officers agents and employees as insureds under the policy for all liability arising out of the provisions of any service and/or sales."	
DSMNO	NO PRIOR APPROVAL Vendor	All University of California purchases require a valid University Purchase Order prior to the execution of services or shipment of product. Acceptances of orders without the appropriate purchase order are done at the vendors' risk. Such orders may result in delayed payment or referral of charges to the individual placing order for payment. If you have questions about this please contact Purchasing Operations Manager 831-459-2239 Cherie Reveles.	Note to vendor
DSMNO2	No Prior end user	Internal Note: Unauthorized purchases result in delays in payment and can jeopardize relations with vendors. Violations may result in the referral of the invoice to the individual placing the order for payment. Questions regarding authorized, unauthorized or restricted purchases should be directed to Cherie Reveles, UC Santa Cruz Material Management, 831-459-2239	See also ATF PO
EDSO1	Edna Sandberg CBO	Edna Sandberg, Chancellors Business Office Ext. 5839	
EMERGENC	Emergency Order	This purchase order is after the fact due to the emergency nature of the required services and/or goods provided by this vendor.	
EMERINVE	Use when equipment is being purchased to replace equipment loss due to fire or other disaster	Replacing Property #, Equivalent Replacement or Upgraded Item: Manufacturer name: Manufacturer model no: CAAN (bldg) code: Custody code: Room (if applicable):	Office of Record
EOPDW	EOP: DALE WHYTE	NAME: Dale Whyte, SERVICE CENTER: EOP, UNIT PHONE: X9-4414	Office of Record
EOPIV	EOP: INGA VINTIMILLA	NAME: Inga Vintimilla, SERVICE CENTER: EOP, UNIT PHONE: X9-5898	Office of Record

Clause	Description	Text	Use
EOPJT	EOP: JANE TAKANO	NAME: Jane Takano, SERVICE CENTER: EOP, UNIT PHONE: X9-4835	Office of Record
EPCCJ	EPC Casandra Johnson	Casandra Johnson, EPC – 460-3048	
EPCSB	delete		
EQUIPLSE	Lease with purchase option	<p>LEASE WITH PURCHASE OPTION Cancelable or Non-Cancelable: Lease Term: Interest Rate: Total principal amount financed: Total interest paid over the term: \$ Total amount (P&I) paid over the term: \$ Payment interval: Payment amount before sales tax: \$ Purchase option at end of term: \$ Final payment date/completion of contract: Use account code 6135 If lease is over \$100,000 contact Plant Accounting For further analysis</p> <p>Notes to Vendor: Please send amortization schedule to: University of California Santa Cruz Plant Accounting 1156 High Street Santa Cruz, Ca 95064</p> <p>THIS PURCHASE ORDER REPRESENTS ONLY THE CURRENT FISCAL YEAR PAYMENTS ON THIS AGREEMENT DUE BEGINNING. THE PAYMENTS FOR EACH FISCAL YEAR THEREAFTER WILL BE EXECUTED BY AN INTERNAL CHANGE ORDER DURING JULY OF THE CORESPONDING FISCAL YEAR.</p>	
EST MAX	Estimated max not to be exceeded	Vendor shall not exceed the “estimated maximum” or “not to exceed” figure without prior approval of the UCSC Purchasing Office.	Miscellaneous
EXCEED	Vendor shall not exceed figure	Supplier/Vendor shall not exceed the “estimated maximum” or “not to exceed” figure without prior approval of the UCSC Purchasing Office.	Miscellaneous

Clause	Description	Text	Use
FAXED PO	Original Order Faxed	Original Order Faxed - Do Not Duplicate	Miscellaneous
FINAIDFO	FINANCIAL AID: FLO QUEEN	NAME: Flo Queen, SERVICE CENTER: FINANCIAL AID, UNIT PHONE: X9-4342	Office of Record
FLEETSVS	Send invoices to Fleet Services	IMPORTANT NOTE REGARDING INVOICES – SEND TO: University of California Services/Central Garage Street 95064 Fleet 1156 High Santa Cruz, CA	Invoice
FOREIGN	Forced, Convict & Indentured labor	The following statement shall be included in all University contracts, purchase orders, subagreements for equipment, materials or supplies: FORCED, CONVICT AND INDENTURED LABOR A. By signing or accepting this purchase order, the seller hereby certifies that no foreign-made equipment, materials, or supplies furnished to the University pursuant to the purchase order will be produced in whole or in part by forced labor, convict labor, or indentured labor under penal sanction. B. Any seller contracting with the University who knew or should have known that the foreign-made equipment, materials, or supplies furnished to the University were produced in whole or in part by forced labor, convict labor, or indentured labor under penal sanction, when entering into a contract pursuant to the above, may have any or all of the following sanctions imposed: 1. The contract under which the prohibited equipment, materials or supplies were provided may be voided at the option of the University. 2. The seller may be removed from consideration for University contracts for a period not to exceed 360 days.	
FREEZE	Hiring Freeze Exception	The following purchase order for personal, professional, consulting, performance or temporary staff is exempt from the campus November 7, 2001 hiring freeze on the following basis: ----- (select one/delete others that do not apply) A. Position is fully funded by an externally funded contract or grant and is exempt B. Position is a health and safety position supporting University Police, Fire Services, Health Center or EH&S and is exempt C. Position has been approved as an exception by the appropriate principal officer (Deans, Vice Chancellors, the University Librarian) Exception is based on: # as defined above. If based on "3", please fax a copy of the signed exception with PO back up, to Central Purchasing office extension 9-3300. Information supplied by:	

Clause	Description	Text	Use
FREIGHT	Copy of freight bill required	Freight charges in excess of \$500.00 require a copy of the actual freight bill to be included with the invoice.	Freight
FSKT	FLEET SERVICES: KEN TAUL	NAME: Ken Taul, SERVICE CENTER: FLEET SERVICES, UNIT PHONE: X9-2491	Office of Record
FSSCKW	Void		
FSTBH	FLEET SERVICES: TIM HILL	NAME: Tim -Hill, SERVICE CENTER: FLEET SERVICES, UNIT PHONE: X9-2656	Office of Record
GURANTE	Equipment is to be guaranteed	Equipment is to be guaranteed against defects in workmanship and material for a minimum of one year from date of delivery.	Warranty
HEADER	Header Test	Attn: Please provide service/supply for the University of California Santa Cruz as shown below Appendix A terms and conditions Apply	
HOLD	Hold payment until goods received	Attn. A/P: Hold payment for three way match	Payment
HUMNL	Delete		
IBMBLKT	IBM Equipment Maintenance Blanket	Equipment Maintenance Service for the equipment described below: Model Number:, Equipment Description:, Serial Number:, Campus Location:, Customer/Account Number:, Monthly/Quarterly Charge: Clause: UNITBLKT, and APPROX.	Unit Blanket
IGNORE	Disregard line item:lease trade-in	DISREGARD THIS LINE ITEM: for UCSC Accounts Payable and Equipment Management purposes ONLY.	Miscellaneous
IND CONT	Independent Contractor Services	Please provide services as an Independent Contractor for the University of California Santa Cruz (dept) as a(title) Either the University or the Contractor may terminate this contract for convenience at any time by giving the other party 30 days' written notice of such action. If one party gives [insert #] days' notice of a breach of this contract and the breaching party fails to cure said breach within said [insert #] -day period, this contract may be terminated by the non-breaching party.	Miscellaneous
INS CER	Insurance Cert on file expires_	Current certificate of insurance on file with UCSC Central Purchasing expires (insert date).	Ins expire date

Clause	Description	Text	Use
INS FILE	Certificate of Insurance on file	Certificate of insurance on file in the Purchasing & Business Contracts Office. Expiration Date: Carrier: Policy #: The Regents of the University of California, its officers, agents, and employees as insureds under the policy for all liability arising out of the provision of any service and/or sales of any goods to UCSC.	Insurance
INSTPAYM	Delete		
INVEQUIP	Inventorial Equipment Information	Manufacturer name: Manufacturer model no: CAAN (bldg) code: Custody code: Room (if applicable): :	Equipment
IPMTSGM	delete		Office of Record
IPMTSINV	delete		
ISOTOPE	Radioactive Isotope order	This is a radioactive isotope - Do not open in receiving.	Safety
KMINV	Void		
KONICA	Konica Maintenance Blanket Txt	Full Service Maintenance for the copier described below: Model Number:, Serial Number:, Campus Location:, Contact Person/Phone:, Monthly/Quarterly Rate:, Per Copy Charge: Clauses: APPROX, BLT, and UNITBLKT	Unit Blanket
LAFSS	Lorraine Anderson	Lorraine Anderson Financial Safety Services 831-459-5535	
LEAHM	Travel Reimbursement	Reimbursement to the named traveler for expenses incurred on the following trip: Date: Location: Purpose: Expenses include: Airfare \$ Mileage \$ Rental Car \$ Other Transportation \$ Parking/Tolls \$ Conference Registration \$ Lodging \$ Meals/Incidentals \$	

Clause	Description	Text	Use
		Miscellaneous \$ Total Expenses \$ Less \$ Balance due to traveler \$	
LEASE	Delete		
LEASEPUR	Lease Purchase (Installment)	LEASE PURCHASE AGREEMENT (INSTALLMENT PURCHASE) This purchase order incorporates by reference the following documents: University of California Lease Purchase Agreement and the following attachments as applicable Exhibit A: Schedule of Equipment Exhibit B: Interest Rate on Progress Payments Exhibit B-1: Variable Rate Examples Exhibit B-1: Variable Rate Examples Exhibit D: Final Delivery and Acceptance Receipt Exhibit E: Schedule of Payments Exhibit F-1: Opinion of Counsel Exhibit F-2: Certificate of Signing Authority Exhibit G: UCC Form 1 Lease Purchase Agreement Term: Interest Rate: Payment amount: \$ Payment Interval: Total Amount Financed (Principal): \$ Total Interest Paid over the Term: \$ Total Amount (P&I) Paid over the Term: \$ Use account code 007090 Payment option (after payment of lease payment due on such date) Send Amortization Schedule to: University of California Plant Accounting 1156 High Street Santa Cruz, CA 95064 THIS PURCHASE ORDER REPRESENTS ONLY THE CURRENT FISCAL YEAR PAYMENTS ON THIS AGREEMENT DUE BEGINNING THE PAYMENTS FOR EACH FISCAL YEAR THEREAFTER WILL BE EXECUTED BY AN INTERNAL CHANGE ORDER DURING JULY OF THE CORRESPONDING FISCAL YEAR.	
LEASEW/O	Lease without purchase option	LEASE WITHOUT PURCHASE OPTION Cancelable or Non-cancelable: Lease term: Total amount paid over life of lease: \$ Market value at time of agreement inception: \$ Payment interval: Payment amount before sales tax: \$ First payment date of lease: Final payment date of lease: Use account code 006170 for payment If lease is over \$1,000,000 contact Plant Accounting for further analysis No Amortization schedule needed	
		NOTE TO VENDOER:	

Clause	Description	Text	Use
		THIS PURCHASE ORDER REPRESENTS ONLY THE CURRENT FISCAL YEAR PAYMENTS ON THIS AGREEMENT DUE BEGINNING. THE PAYMENTS FOR EACH FISCAL YEAR THERAFTER WILL BE EXECUTED BY AN INTERNAL CHANGER ORDER DURING JULY OF THE CORRESPONDING FISCAL YEAR.	
LIB	Library Invoices	IMPORTANT NOTE REGARDING INVOICES--SEND TO: Sharon Call, 313 McHenry Library, 1156 High Street, Santa Cruz, CA 95064	Payment-McHenry
LIBCC	LIB FIN SVCS: CONNIE CROKER	NAME: Connie Croker, SERVICE CENTER: LIBRARY FINANCIAL SVCS., UNIT PHONE: X9-2713	Office of Record
LIBKH	LIB FIN SVCS: KIM HUGHES	NAME: Kim Hughes, SERVICE CENTER: LIBRARY FINANCIAL SVCS., UNIT PHONE: X9-2713	Office of Record
LIBLAN	LIB FIN SVCS: LOIS A. NEAL	NAME: Lois A. Neal, SERVICE CENTER: LIBRARY FINANCIAL SVCS., UNIT PHONE: X9-2713	Office of Record
LMLDG	After the Fact PO: Donna Gorman	AFTER THE FACT PURCHASE ORDER Buyer approved purchase (Donna Gorman)	
LOWRISK	Low Risk Service Indemnification	For use with low risk personal and professional services. Hold Harmless: Contractor is fully aware of and understands all of the risks, which, may be associated with the Service/Event and voluntarily assumes any and all such risks. Contractor agrees that UCSC shall not be liable to Contractor for any injuries incurred by Contractor in connection with the Service/Event or for any loss of, or damage to, Contractor's property, unless such loss is caused by the sole negligence or willful Indemnification: Contractor hereby agrees to defend, indemnify, and hold the Regents of the University of California, its officers, agents, and employees harmless from and against any an all claims, demands, judgements, costs an expenses arising out of the negligence or willful misconduct of Contractor in conducting the Service/Event. Contractor agrees to reimburse UCSC for actual cost of repairing or replacing any UCSC contractor is on UCSC premises. If legal action equipment or property damaged by Contractor while is required by UCSC to enforce any of its right under this Agreement, Contractor agrees to reimburse UCSC for reasonable attorneys' fees and court costs.	Personel services
MFG WTY	Manufacturer's Warranty Applies	Manufacturer's Warranty Applies	Warranty
MINOLTA	Minolta Maintenance Blanket Txt	Full Service Maintenance Agreement for the copier described below: Model Number:, Serial Number:, Campus Location:, Contact	Unit Blanket

Clause	Description	Text	Use
		Person/Phone:, Monthly/Quarterly Rate:, Per Copy Charge: Clauses: APPROX, and UNITBLKT.	
MSDS	Include MSDS with shipment	Include MSDS with shipment.	Safety
MULTI	Multiple ship to locations	Notice to vendor: Note various delivery locations following line item description.	Delivery
NEED INS	Certificate of Insurance needed	No services shall be provided against this order until an approved Certificate of Insurance has been received by the UCSC Purchasing Office (Fax to 408-459-3300 or mail to 1156 High Street, Santa Cruz, CA 95064 ATTN: Insurance Desk). Name the Regents of the University of California, its officers, agents, and employees as insureds under the policy for all liability arising out of the provision of any service and/or sales of any goods to UCSC. Provide for thirty (30) days prior written notice of cancellation. Verify required insurance coverage and limit requirements with the buyer listed on this purchase order.	Insurance
NOPRIOR	No Prior Approval	IMPORTANT NOTE TO CAMPUS UNIT PLACING THE ORDER: After the fact purchase orders are a violation University of California Business and Finance Bulletin 43. Purchasing authority is a delegation from the campus Materiel Manager with a specific limit. Do NOT place orders if you have no delegation. If you have a delegation, do NOT place for amounts that exceed your delegation. In emergencies or if extenuating circumstances occur, notify a Central Purchasing buyer for assistance (X9-2311). The University's vendor relationships are compromised by after the fact purchase orders that delay payment for goods and/or services provided by the vendor in good faith. Services performed outside California	Dept abuse
NOTCAL	Service outside California	Services performed outside California	
NS CHORD	Nat Sci Change Order Clause	Change Order # ___ to P _____ dated _____, to revise order as follows:-----CO Requested by:, CO Funding Authorized by:, CO Completion by:, CO Approval by Notes:	Change Order
NS INV	Natural Sciences Send Invoice	PLEASE SEND INVOICE TO: UCSC Natural Sciences AS Trailer #6 1156 High Street Santa Cruz CA 95064	
NS ST PO	Natural Sciences Stockroom PO's	URGENT: ALL INVOICES MUST BE MARKED WITH THE FOLLOWING PURCHASE ORDER # ST0 _____ (to support the UCSC internal Banner Stores system). Do NOT use P00 _____ (use ST	Natural Sciences

Clause	Description	Text	Use
		instead of P)	
NSB250	Approval < \$250	Approval required for policy exception below \$250 for:	
NSB251	Approval Required > \$250	Approval required for policy exception over \$250 for:	
NSB500	Additional Approval > \$500	Add'tl approval required for payment over \$500	
NSBCLOSE	NAT SCI CLOSED PO	What: When: Purchase order closed by Final Pmt Indicator. Memo (Y/N)	Credit Natural Sciences
NSBDEM	NAT SCI DEMURRAGE	Payment to vendor for cylinder rentals of invoice # dated among many Nat Sci accounts.	Payment Total split Natural Sciences
NSBDLG	NAT SCI BUS: DONNA GORMAN	NAME: Donna Gorman, SERVICE CENTER: NSBO, UNIT PHONE: X9-2188	Office of Record
NSBDMGE	NAT SCI WORK PERFORMED	For payment for work performed prior to signing of oath for time period from to	Natural Sciences
NSBENTER	NAT SCI ENTERTAINMENT	WHO: WHAT: WHERE: WHEN: WHY:	Natural Sciences
NSBFAC	Express 12, Nat Sci Facilities	EXPRESS 12! Please call Vicki McCarroll at 831-459-4714 one week before delivery date.	
NSBFELLO	NAT SCI FELLOWSHIP	(Month/Year) Fellowship/Scholarship payment	Natural Sciences
NSBHOUS	NAT SCI HOUSING ALLOWANCE	Payment for housing allowance for period from to in connection with collaboration with (PI name).	Natural Sciences
NSBINS	NAT SCI BUS: HEALTH INSURANCE	Payment of/to reimburse employee for payment of health insurance for period	Natural Sciences
NSBLAM	Void		
NSBLJM	Void		Office of Record

Clause	Description	Text	Use
			Record
NSBMLD	Void		Office of Record
NSBPAO	NAT SCI BUS: PAM OLIVIERI	NAME: Pam Olivieri, SERVICE CENTER: NSBO, UNIT PHONE: X9-3728	Office of Record
NSBPART	NAT SCI WORKSHOP PAYMENT	Payment for participation in workshop/conference on _____ /or during period _____ in connection with _____ (program) or to (place).	Natural Sciences
NSBPMH	NAT SCI BUS: PEGGY HATHCOCK	NAME: Peggy Hathcock, SERVICE CENTER: NSBO, UNIT PHONE: X9-3940	
NSBPWJ	Void		Office of Record
NSBRAD	NAT SCI RADIATION DETECTION	Payment for Radiation Detection badge & ring svcs Payment of invoice # _____ dated _____ Agreement # _____ among many Nat Sci accounts.	Natural Sciences UC Total split
NSBREIMB	NAT SCI REIMBURSEMENT	Reimbursement to payee: _____ When: _____	What: Natural Sciences
NSBRLC	NAT SCI BUS: ROBIN CHASE	NAME: Robin Chase, SERVICE CENTER: NSBO, UNIT PHONE: X9-2188	Office of Record
NSBRSAWD	NAT SCI STUDENT RESEARCH AWARD	Payment of Student Research Award for fiscal year	Natural Sciences
NSBSLA	Void		Office of Record
NSBSUB	NAT SCI SUBAWARD PAYMENT	Payment # _____ on Subaward # _____	Natural Sciences
NSBTRVL	NAT SCI TRAVEL	Destination: _____ Purpose: _____ Departure Date: _____ Return Date: _____	Natural Sciences

Clause	Description	Text	Use
NSBVEND	NAT SCI VENDOR	What: When: Why:	Natural Sciences
NSDF	NatSci Freight Charges \$.01	Internal Process. Disregard unit price for shipping. Actual charges will be paid.	
NSSHIP	Nat Sci Ship to address	Note to Central Purchasing: If item is over 100 lbs ship code must be changed to read UCR otherwise ship code NSI to the Thimann Lab Rec	
OSHA	Equipment to comply with OSHA	Equipment and material shall comply with all Federal, State, and local safety rules and regulations, including OSHA.	Safety
OVERAGE	10% over/underrun acceptable	10% over/underrun acceptable; overage not to exceed \$100.00.	Printing
PANSONIC	Panasonic Maintenance Blanket Txt	Full Service Maintenance for the copier described below: Model Number:, Serial Number:, Campus Location:, Contact Person/Phone:, Monthly/Quarterly Rate:, Per Copy Charge: Clauses: APPROX, BLT, and UNITBLKT.	Unit Blanket
PAOCOP	Void		
PACOP	PO Documentation: Pam Olivieri	Quote #: Quote Dated: Vendor Contact Person: UC Contact Person: Initiating Buyer: Pam Olivieri If you have any technical questions, please contact (Requestor) @ x9- Warranty Terms:	
PHYP	Physical Plant	Please provide services for the University of California Santa Cruz Physical Plant per your specific instructions from 831-459 and the job number listed below. Job MO Location IMPORTANT NOTE REGARDING INVOICES - SEND TO: University of California Santa Cruz Physical Plant Service Center, Barn G 1156 High Street Santa Cruz, CA 95064 Attn: Certificate of Insurance must be on file with UCSC Central Purchasing prior to work being performed.	Physical Plant PO's
PO GOOD	PO good for 10 days only	This purchase order is good only for 10 working days from the date of	Miscellaneous

Clause	Description	Text	Use
		issue.	
PPCDM	PHYSICAL PLAN'G/CONST:	IMPORTANT NOTE REGARDING INVOICES -- SEND TO: University of California Santa Cruz Physical Planning & Construction 1156 High Street/Barn G Trailer Santa Cruz CA 95064 NAME: Lara Rainey UNIT PHONE: 831-459-2805 COMMENTS:	Office of Record
PPCM	PHYSICAL PLANT: CAROL MALER	NAME: Carol Maler, SERVICE CENTER: PHYSICAL PLANT, UNIT PHONE: X9-4972	Office of Record
PPMP	Physical Plant: Melody Pahel	Melody Pahel Service Center: Physical Plant Phone: X 9-5561Comments	
PPSC1	Send invoices to PPSC, Barn G	IMPORTANT NOTE REGARDING INVOICES--SEND TO: University of California, Physical Plant Service Center, Barn G, 1156 High Street, Santa Cruz, CA 95064 Attn: Carol Maler	Payment-Physical Plant
PREPAY	Prepayment is being made	The university is pre paying your order in compliance with your requirements. However, the university requires that you supply a re-cap invoice or receipt verifying that goods/services were rendered and that charges were accurate. Re-cap invoice should be sent to: UCSC, Central Accounting Office, 1156 High Street, Santa Cruz, CA 95064.	Payment
REFUND	Send refund checks to accounting	Refund should be by check made out to "UC Regents". Forward check to: UCSC, Central Accounting Office, 1156 High Street, Santa Cruz, CA 95064.	Payment-Accounts Payable
REFUNEX	UNEX: JANICE LOEWEN	NAME: Janice Loewen, SERVICE CENTER: UNEX, UNIT PHONE: 831-427-6600 x7304 Comments	Office of Record
REGGJ	REGISTRAR	NAME: _____, SERVICE CENTER: REGISTRAR, UNIT PHONE: X9-4682	Office of Record
REGHSF	delete		Office of Record
REGRA	REGISTRAR: RAUL ALTAMIRANO	NAME: Raul Altamirano, SERVICE CENTER: REGISTRAR, UNIT PHONE: x9-1358	Office of Record
REGRTA	Delete		Office of Record

Clause	Description	Text	Use
RLMCP	PO Documentation: Robin Chace	<p>Originating Buyer: Robin Chace x9-2187 rchace@natsci.ucsc.edu</p> <p>Quote #: Vendor Contact: (V.C.) Phone #: (V.C.) Fax #: (V.C.) Email: Requisitioner/UC Contact: Phone / Fax: Email: Delivery Location: Date Needed:</p>	
RUSH1	Rush Order. Ship Overnight Air	Rush Order. Ship Overnight Air.	Delivery
RUSH2	Rush Order. Ship 2nd Day Air	Rush Order. Ship 2nd Day Air.	Delivery
SANYW	Delete		Office of Record
SFC	Scholarship Fellowship	<ol style="list-style-type: none"> 1. INDICATE TYPE CANDIDATE: Degree _____ Non Degree _____ or Post Doc _____ 2. INDICATE PAYMENT TYPE AND AMOUNT FOR EACH: Total Qualified Payment \$ _____ Qualified Payment is for: _____ (examples are: Tuition, books, fees and related expenses, - be specific.) Total Non Qualified Payment \$ _____ Non Qualified Payment is for: _____ (examples are: Room & board, transportation and other general living exp. – be specific.) 3. INDICATE PERIOD OF SCHOLARSHIP OR FELLOWSHIP THAT THE PERSON IS RECEIVING THE PAYMENT FOR: Period From _____ to _____ 4. INDICATE THE TOTAL NUMBER OF PAYMENTS _____ THE INDIVIDUAL WILL RECEIVE DURING THE PERIOD FROM: _____ TO _____ FOR THIS SCHOLARSHIP OR FELLOWSHIP. 5. INDICATE THE TOATL DOLLAR AMOUNT THE INDIVIDUAL WILL RECEIVE FOR THIS SCHOLARSHIP OR FELLOWSHIP \$ _____. REMARKS:	

Clause	Description	Text	Use
SHIP	Orders must be shipped complete	Orders must be shipped complete. Partial shipments will not be accepted.	Delivery
SIERRA	Sierra Water Blanket/Line Item Text	Reference Local Agreement Number: CA96-017-28 Estimated bottles per month @ \$2.90: Equipment Rental (Type/Rate): Customer/Account Number:, Campus Location:, Contact Person/Phone: Clauses: APPROX, BLT, UNITBLKT, and CANCEL	Unit Blanket
SOAR1	Cost/Pickup by/Receipt required	TOTAL COST MAY NOT EXCEED \$XXX.XX, INCLUDING TAX. Items are for pickup by XXXXXXXX XXXXXXXXXXXX. * XXXXXXXXXX: An itemized receipt for this purchase MUST be returned to SOAR with two (2) days of purchase. If this purchase order is NOT used, it must be returned to SOAR. Until a receipt or the unused purchase order is turned in, \$XXX.XX will remain liened against the account.	SOAR only
SOAR2	What, When, Where, Who, Why	WHAT: Multicultural Festival WHEN: 5/12/02 WHERE: Upper Quarry WHO: 3,000 students, 500 staff/faculty/community WHY: Cultural Festival	SOAR only
SOARHN	delete		Office of Record
SOARSH	SOAR: SHARON ALHEIT	NAME: Sharon Alheit, SERVICE CENTER: SOAR, UNIT PHONE: X9-3471	Office of Record
SOC INV	Social Sciences Invoic Clause	IMPORTANT NOTE REGARDING INVOICES--SEND TO: University of California, Social Sciences Division, 1156 High Street, Santa Cruz, CA 95064 Attn: Service Center	Payment-Social Sciences
SOCSCI	SOCIAL SCIENCES SERVICE CENTER	NAME: , SERVICE CENTER: SOCIAL SCIENCES, UNIT PHONE:	Office of Record
SOCSCICH	Delete		Office of Record
SOCSCIDV	Delete		
SPEC CHG	There will be no change in specs	There will be no change in specifications or plans without written notice the UCSC Purchasing Office	Purchasing

Clause	Description	Text	Use
		the UCSC Purchasing Office.	
SSHINV	Void		
STAPLES	Account and customer #	The University of California Santa Cruz Account number: 601110007081847 Customer number: 401667270	
STEVLC	STEVENSON: LIZ COWAN	Name: Liz Cowan SERVICE CENTER: STEVENSON UNIT PHONE: X9-2172~COMMENTS:	
SUBINV	Subaward Payment Info (CREDE)	Alice Burke/CREDE/9-3623 ~Subaward: SC-96243- Period: Invoice:	
SUP3ADON	Add to Prevailing Wage	Line 27 of Supplement 3 revised to read: "The contractor, and each subcontractor thereunder shall keep, or cause to be kept, an accurate record showing name, address, social security number, work week, occupation and actual per diem wages paid." Add additional paragraph to end of Supplement 3: "All contractors and subcontractors must employ apprentices in apprenticeship occupations in a ratio of not less than one apprentice for each five journeymen."	Purchasing
SUPERSED	Supersedes and cancels previous PO	This purchase order cancels and supersedes	Unit Blanket
SUPP 5	Supplement 5 attached	University of California "Supplement 5" applies; copy attached	Purchasing
SVC<\$500	Low Risk Personal Svc <LVPA Limit	For and in consideration of the granting permission by the Regents of the University of California on behalf of the Santa Cruz Campus, hereinafter referred to as UCSC, to use campus facilities and/or equipment for the above referenced service and for the fee stated herein, if any, the named Contractor hereby agrees to provide service at the above referenced event on the date and time stated above, In addition, Contractor hereby agrees to each of the following: CANCELLATION: Neither of the parties hereto shall have any liability to the other for cancellation of the Service/Event. However, upon cancellation by UCSC, UCSC will pay any documented travel costs actually incurred by the Contractor prior to the date of notice of such cancellations, not to exceed the Compensation stated above, if any. TERMINATION: UCSC shall have the absolute right to terminate any Service/Event at any time when, in the sole opinion of UCSC, if continuing such health or safety of event participants or member of the campus community. INDEPENDENT CONTRACTOR: Contractor shall conduct the Service/Event as an independent contractor and not as an employee or	Miscellaneous

Clause	Description	Text	Use
		<p>agent of UCSC. As an independent contractor, contractor shall have no entitlement to UCSC worker's compensation benefits. HOLD HARMLESS: Contractor is fully aware of and understands all of the risks which may be associated with the Service/Event and voluntarily- assumes any and all such risks. Contractor agrees that UCSC shall not be liable to Contractor for any injuries incurred by Contractor in connection with the Service/Event or for any loss of, or damage to, Contractor's property, unless such loss is caused by the sole negligence or willful misconduct of UCSC, its agents or employees. INDEMNIFICATION: Contractor hereby agrees to defend, indemnify, and hold the Regents of the University of California, its officers, agents, and employees harmless from and against any and all claims, demands, judgments, costs and expenses arising out of the negligence or willful misconduct of Contractor in conducting the Service/Event. Contractor agrees to reimburse UCSC for the actual cost of repairing or replacing any UCSC equipment or property damaged by Contractor while contractor is on the UCSC premises. If legal action is required by UCSC to enforce any of its rights under this Agreement, Contractor agrees to reimburse UCSC for reasonable attorney's fees and court costs.</p>	
TAPSMCC	Void		
TAX	State withholding tax for IDOC	<p>State withholding tax for IDOC Call, AP, X9-4797</p>	
TAXEXEMP	Sales tax exemption; federal title	<p>The undersigned hereby certified that s/he is a Buyer of the University of California Santa Cruz and that the article or articles specified on this purchase order are purchased from the named vendor for the EXCLUSIVE USE of the University of California, Santa Cruz. It is understood that the exemption from tax in the case of sales of articles purchased under this exemption certificate to a State, etc, is limited to the sale of articles purchased for its EXCLUSIVE USE, and it is agreed that if articles purchased tax-free under this exemption certificate are sold to employees or others, such fact will be reported by the Buyer to the manufacturer of the articles or article covered by this purchase order. It is also understood that the fraudulent use of this purchase order statement to secure exemption will subject te undersigned and all guilty parties to a fine of not more than \$10,000 or to imprisonment for not more than five years or both together with costs of prosecution.</p>	
TB	CREDE	Theresa Beasley, 459-3623, CREDE	

Clause	Description	Text	Use
TEAR SHT	Tear sheet required for payment	Tear sheet must be submitted with invoice for payment.	Printing
TERMS	Terms & conditions remain unchanged	All other terms and conditions remain unchanged.	Change Order
TRADE-IN	Trade-In Header Text Clause	Not to Vendor: itemize as follows – Full value of new equipment: (before trade-in amount is deducted) Sales tax on full value: Freight charges (if applicable): Less trade-in allowance: < > TOTAL AMOUNT DUE:	
TRADEHDR	TRADE-IN HEADER	Full value of new equipment: \$(before trade-in is deducted Sales tax on full value: \$Freight charges if applicable: \$Less trade-in allowance: \$Total amount due: \$	
TRADELIN	Trade-In Line Item Text	Property Number: Serial #: Description of trade-in equipment: Trade-in Allowance for equipment: <\$ >Original PO # for trade-in equip: Full value of new equipment: \$(BEFORE trade-in allowance deducted) ~FOAPAL FOR TRADE-IN CREDIT: (if different than the equipment FOAPAL).	
UC LEASE	Delete		See leasepur
UCOLICGP	Delete		Office of Record
UCOLICLE	UCO LICK: LISA ELLIS	NAME: Lisa Ellis, SERVICE CENTER: UCO LICK, UNIT PHONE: X9-5165	Office of Record
UCOLIKIV	UCO / LICK INVOICE ADDRESS	VENDOR NOTE: PLEASE SEND INVOICE(S) TO: UCO / LICK OBSERVATORY ADMINISTRATION NATURAL SCIENCES II ANNEX ATTN: PURCHASING SANTA CRUZ, CA 95064	
UCOLKES	delete		
UCOLKPUB	UCO / LICK PUBLICATION HEADER TEXT	PUBLICATION NUMBER: AUTHOR(S): JOURNAL: REQUESTOR: ROBIN WITMORE @ 9-2201 NOTE: REQUIRED DATE S ESTIMATE ONLY, THIS ORDER IS FOR	

Clause	Description	Text	Use
UCOLKTC	UCO / LICK TECHNICAL CONTACT	PUBLICATION OF A PAPER YET TO BE WRITTEN. VENDOR NOTE: PLEASE DIRECT TECHNICAL QUESTIONS ABOUT HIS ORDER TO: PHONE #: 831-459- EMAIL:	
UNEXADDR	University Extension S.C. Address	740 Front Street, Suite 155, Attn: Karen Rodriguez	Payment- UNEXx
UNEXDD	UNEX: DARYLIN DRUHE	NAME: Darylin Druhe, SERVICE CENTER: UNEX, UNIT PHONE: 427-6650	Office of Record
UNEXKR	UNEX: KAREN RODRIGUEZ	NAME: Karen Rodriguez, SERVICE CENTER: UNEX, UNIT PHONE: 427-6628	Office of Record
UNEXMM	UNEX: MICHAEL MRACHE	NAME: Michael Mrache, SERVICE CENTER: UNEX, UNIT PHONE: 427-6699	Office of Record
UNEXPB	UNEX: PETER BAUER	NAME: Peter Bauer, SERVICE CENTER: UNEX, UNIT PHONE: 427-6688	Office of Record
UNITBLKT	Disregard unit price	Disregard unit price @1.00; extended amount of estimated expenditures applies.	Unit Blanket
URG NEED	Material urgently needed	This material is urgently needed. Please ship by the date required.	Delivery
USE TAX	Use tax applies	Use tax will be accrued directly to the State of California by the UCSC Accounting Office.	Tax
WINDOWCOV	Window Covering Specifications	Fabrication: Power sewn with all seams overlapped and free of pucker. All selvage endges removed before fabrication close end seams. 1-1/2" doubled side hems. Blind stitch. Bottom hems 3" or 4" double blind stitch. Weights sewn at each seam and corner. Drape to be typical french pleated 2 to 2-1/2 X fullness. Headlings for french pleated drape shall be 4" double thickness. Pleats spaced uniformly 3-1/2 - 4-1/2".	Specifications
WTY 1YR	One year warranty applies	One (1) year parts and labor warranty applies.	Warranty
WTY 2YR	Two year warranty applies	Two (2) year parts and labor warranty applies.	Warranty
WTY 30D	30 day warranty applies	30 day warranty applies to this purchase.	Warranty

Clause	Description	Text	Use
WTY 5YR	Five year warranty applies	Five (5) year parts and labor warranty applies.	Warranty
WTY 90D	90 day warranty applies	90 day warranty applies to this purchase.	Warranty
XERXBLKT	Xerox Maintenance BLKT/LineItem Txt	Full Service Maintenance Agreement for the copier described below: Model Number:, Serial Number:, Campus Location:, Contact Person/Phone:, Xerox BPA #0709591-01 applies, Monthly/Quarterly Rate:, Per Copy Charge: Clauses: APPROX, and UNITBLKT.	Unit Blanket
YR2000	Year 2000 Compliant-Hdwr/Software	By accepting this order Seller certifies that the product being provided to the University is Year 2000 compliant and will operate correctly in all situations where four-digit years are required for correct operation in the year 2000 and beyond.	Specifications