

## **City of San Diego PURCHASE ORDER**

PO No. | 4500091265

Page 1 of 1 Date: 07/31/2017

Ship To:

City of San Diego Billing Contact for Delivery Address

Bill To: **ECOMONIC DEVELOPMENT DEPARTMENT** 

STE 1400 1200 THIRD AVE SAN DIEGO CA 92101 Billing Contact: MARLA ROBINSON

Telephone:

E-Mail:mdrobinson@sandiego.gov

Vendor: La Jolla Village Merchants Assoc

1246 Roslyn Lane La Jolla CA 92037 Terms: within 30 days Due net

**Delivery Terms: FOB Destination** 

Buyer: Ana Garcia **Telephone:** 619-236-6150

Vendor ID: 10025068 Telephone: sfortune@lajollabythesea.com E-Mail: AnaG@sandiego.gov

| Line#      | Item ID/Description   | Del.Date                     | Quantity/UM        | Unit Price               | Extended Price |            |
|------------|---|------------------------------|--------------------|--------------------------|----------------|------------|
| 1          | FY18 LA JOLLA BID ASSESSMENT FY 2018 Agreement with La Jolla Village Merchants Associa                              | 06/30/2018<br>ation R-311113 | 220,000 EA         | USD 1.00                 | USD            | 220,000.00 |
| ***        | Department Contact: Eddpayments@sandiego.gov 619-23 Item partially delivered  | 6-6700                       |                    |                          |                |            |
|            |   |                              |                    |                          |                |            |
|            |   |                              |                    |                          |                |            |
|            |   |                              |                    |                          |                |            |
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|            |   |                              |                    |                          |                |            |
| lotes: Th  | ne Terms and Conditions of this Purchase Order are av   | ailable at http://sandiego.g | ov/purchasing/     |                          |                |            |
| IMPORTANT! |   |                              | Line Item Total S  | \$ 220,000.00<br>\$ 0.00 |                |            |
| o ensur    | re prompt payments, PO # must appear on all sh<br>to <i>Billing</i> Contact person at <i>Bill-To</i> address listed | ipments and invoices: a      | Il invoices must b | e PO Total               | \$             | 220,000.00 |