

## City of San Diego PURCHASE ORDER



Date: 10/30/2017 Pag

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Ship To: EVMNTL SRVS-MIRAMAR LNDFIL-FLD OPS Att: Craig Fergusson 5180 CONVOY ST SAN DIEGO CA 92111-0000		ENVIRONMENTAL SERVICES     (       STE 210     9601 RIDGEHAVEN CT       SAN DIEGO CA 92123-1676     1			Billing Contact: CATHY WIELAND Telephone: E-Mail:cwieland@sandiego.gov				
Vendo		L			Terms:				
venuo	nawinome machinery CO				within 30 c	days Due net			
16945 Camino San BernardoDelivery ToSan Diego CA92127-2405FOB Destir									
					TOD Desi				
Buyer:						TanyaRadomyshelsky			
Telephone						e: 619-235-5	855		
Vendor ID: 10002737 Telephone:858-974-6800 E-Mail: ar@hawthornecat.com E-Mail:					E-Mail:	TRadomys	shels@	sandie	go.gov
						-			
Line #	Item ID/Description Serv # Service De	scription	Del.Date	Quanti	ity/Ord UoM	Unit Price/Pr		Exte	nded Price
		scription				Conv Fac			
1	Machine rental, various		06/30/2018	35	,000 EA	1.00	EA	USD	35,000.00
	Send invoices via USPS to the Bill-To address, or as a PDF attachment to: Landfills_AP@sandiego.gov								
	** Please include "Miramar Landfill" & the PO n	imber on invoic	°e **						
	Vendor to furnish as required heavy duty machi from 7/1/2017 through 6/30/2018. Per Contract Insurance to be updated as required.		ar Landfill						
	Dept Contact: Michael Dunn 858-492-6155, MD	unn@sandiego	.gov						
	Non-Deductible Tax							USD	2,712.50
****	Item partially delivered								2,112.00
2	Machine delivery or Pick up		06/30/2018		20 EA	150.00	EA	USD	3,000.00
	Send invoices via USPS to the Bill-To address, to: Landfills_AP@sandiego.gov	or as a PDF atta	achment						
	** Please include "Miramar Landfill" & the PO no	umber on invoic	e **						
	Vendor to furnish delivery and pick up of heavy Miramar Landfill from 7/1/2017 through 6/30/20								
	00002322. Insurance to be updated as required.								
	Dept Contact: Michael Dunn 858-492-6155, MD	unn@sandiego	.gov						
	Non-Deductible Tax							USD	232.50
****	Item partially delivered							000	202.00
Notes:	Equipment Rental Rates by Day, Week, and Mo	nth as of 7/21/2	2015:						
	LINE ITEM,,,,Daily Rate,,,,Weekly Rate ,, Month	ly Rate							
	1,,,,,,\$575,,,,,\$2300,,,,,,\$6900 2,,,,,,\$1050,,,,,\$4200,,,,, \$12,500								
Notes: Th	he Terms and Conditions of this Purchase O	der are availa	able at http://sandiego.go	v/purcha	asing/	SEE	LA	ST I	PAGE
	IMPC	ORTANT!				<b>FO</b>	R <sup>-</sup>	ΓΟΤ	'AL
To ensur	re prompt payments. PO # must appear	on all shipr	ments and invoices: al	l invoice	es must be	_			
To ensure prompt payments, PO # must appear on all shipments and invoices; all invoices must be directed to <i>Billing</i> Contact person at <i>Bill-To</i> address listed above									



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ne#	Item ID/Description	Del.Date	Quantity/Ord UoM	Unit Price/Prc Uom	Extended Price
	Serv# Service Description 3,,,,,,,\$170,,,,,,\$680,,,,,, \$2000			Conv Factor	
	4,,,,,,\$500,,,,,\$2000,,,,, \$6000				
	5,,,,,,,\$425,,,,,,\$1700,,,,,,\$5100				
	6,,,,,,,\$500,,,,,,\$2000,,,,,, \$6000				
	7,,,,,,\$150,,,,,,\$450,,,,,,\$1350				
66. TI	ne Terms and Conditions of this Purchase Order are available at ht	tn://sandiego	aov/purchasing/		
c3. II		up.//sailuleg0	.yov/purchashiy/	Line Item Total @	20 000
				Line Item Total \$ Tax \$	
	IMPORTANT!			Tax \$	2,945
nsure	e prompt payments, PO # must appear on all shipments and billing Contact person at Bill-To address listed above	nd invoices:	all invoices must be		40,945
	o Billing Contact person at Bill-To address listed above			PO Total \$	40,945