

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

PO No. | 4500102179

Page 1 of 2 Date: 07/24/2018

Ship To:

POLICE-CRIME LAB 1401 BROADWAY, MS-725 San Diego CA 92101-5710

Vendor ID: 10017053

Bill To:

Telephone:760-322-9925 E-Mail: info@amrn.com

**IMPORTANT!** 

POLICE-FISCAL 1401 BROADWAY, MS715 SAN DIEGO CA 92101-5710 **Billing Contact:** 

Enrique Cortes Bonilla

Telephone:

E-Mail: ECORTESBONIL@PD.SANDIEGO

American Forensic Nurses Vendor:

for ACH payment

51321 Avenida Bermudas #1625

La Quinta CA 92247

Terms:

within 30 days Due net

**Delivery Terms: FOB Destination** 

Buver: Michael Warner Telephone: 619-236-6154

E-Mail: MWarner@sandiego.gov

Item ID/Description Quantity/Ord UoM Unit Price/Prc UoM Line# Del.Date **Extended Price** Serv# **Service Description Conv Factor** 1 **BLOOD DRAW ON CALL OFF SITE** 06/30/2019 1,100 EA 55.00 EA USD 60,500.00 San Diego Police Dept. /Crime Laboratory Blood Draw on call services, off site As needed, per OA not to exceed Requestor: Maybelline Ridgeway (619) 531-2578 MS 725 Analyst: Rita Castillo (619) 525-8450 MS715 PO number to be on all invoices. \*\*\*To ensure prompt payments please mail invoices within five business days of service. Invoice should be mailed to: San Diego Police Department ATTN: Accounts Payable 1401 Broadway, MS-715 San Diego, CA 92101 Item partially delivered **DRY RUN** 06/30/2019 75 EA USD 2 30.00 EA 2.250.00 Dry Run Item completely delivered 3 **COURT TIME TESTIMONY** 06/30/2019 25 HR 30.00 USD 750.00 HR Court Time Testimony Item partially delivered ON SITE AT POLICE HEADQUARTERS 06/30/2019 12 MON 8500.00 MON USD 102,000.00 On-site at Police Headquarters Item partially delivered The Terms and Conditions of this Purchase Order are available at http://www.sandiego.gov/purchasing/vendor **SEE LAST PAGE FOR TOTAL** 



## City of San Diego PURCHASE ORDER

PO No. 4500102179

**Date:** 07/24/2018

Page 2 of 2

ine#	Serv#	Item ID/Description Service Description	Del.Date	Quantity/Ord UoM	Unit Price/Prc Uom Conv Factor	Extended Price
Notes:	PO released NTE purchase order value or as may be modified by the City.  Update Insurance and Business Tax Certificate as required.					
e Terms and Conditions of this Purchase Order are available at http://www.sandiego.gov/purchasing/vendor					,	
					Line Item Total \$	
IMPORTANT!					Tax \$	0.0
ensure	e prompt pavn	nents, PO # must appear on all shipmer act person at <i>Bill-To</i> address listed above	nts and invoices	: all invoices must be	PO Total \$	165,500.0