

City of San Diego **PURCHASE ORDER**

PO No. | 4500102432

Page 1 of 2 Date: 07/26/2018

Ship To:

P & R MOUNT HOPE CEMETERY 3751 MARKET ST San Diego CA 92102-4527

Bill To:

Community Parks II 202 C Street, MS 804C San Diego CA 92101

Billing Contact: JUANITA MOILANEN

Telephone:

E-Mail:jmoilanen@sandiego.gov

Locator Services Inc Vendor:

dba Able Patrol and Guard 4616 Mission Gorge PI San Diego CA 92120-4133 Terms:

within 30 days Due net **Delivery Terms: FOB Destination**

Buyer: Michael Warner Telephone: 619-236-6154

Telephone:619-229-6100 E-Mail: marilu@ablepatrolandguard.com Vendor ID: 10011610 E-Mail:

MWarner@sandiego.gov

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Line#	Item ID/Description Serv # Service Description	Del.Date	Quantity/Ord UoM	Unit Price/P Conv Fac		Exter	nded Price
1	SECURITY GUARD SERVICES	06/30/2019	1,040 HR	22.90	HR	USD	23,816.00
**	8 AM TO 5 PM WEEKENDS/HOLIDAYS Item partially delivered						
3	SECURE WALK-IN GATES	06/30/2019	8 HR	360.00	HR	USD	2,880.00
	7 NIGHTS A WEEK, MARCH THROUGH OCTOBER						
	PROVIDE STAFF TIME SHEET WITH EACH INVOICE.						
	PER QUOTE THIS PO REPLACES PO 4500091258 PERIOD COVERED: 07/01/2018 THROUGH 12/31/2019 PAY PER INVOICE. INSURANCE AND CITY BUSINESS TAX CERTIFICATE TO E						
	DEPARTMENT CONTACTS: FRANCISCO CASTRUITA (619) 527-3414 KIM MATHIS (619) 236-7342						
	SERVICE TO BE PERFORMED AT: MOUNT HOPE CEMETERY 3751 MARKET STREET SAN DIEGO, CA 92102						
	PLEASE MAIL THE INVOICES TO: MOUNT HOPE CEMETERY 202 C STREET, MS 804C SAN DIEGO, CA 92101						
	FOR INVOICE INFORMATION: JUANITA MOILANEN, ACCOUNTS PAYABLE PHONE: (619) 525-8239 EMAIL: JMOILANEN@SANDIEGO.GOV						
**	Item partially delivered						
lotes:	PO released NTE purchase order value or as may be modified by Update Insurance and Business Tax Certificate as required.	by the City.					
	WAGE REQUIREMENTS: PURCHASE ORDERS EXECUTED	ON OR AFTER JANUAF	RY 1, 2015				
he Tern	ns and Conditions of this Purchase Order are available at h	ttp://www.sandiego.go	ov/purchasing/vendor	SEE	LA	ST F	PAGE
	IMPORTANT!			FOR TOTAL			

To ensure prompt payments, PO # must appear on all shipments and invoices; all invoices must be directed to Billing Contact person at Bill-To address listed above



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_ine#	Item ID/Description	Del.Date	Quantity/Ord UoM		Extended Price
	Serv# Service Description By performing the services detailed in this purchase order. Contract	tor	-	Conv Factor	
	By performing the services detailed in this purchase order, Contract is entering into a contract with the City. Contractor certifies that he	ioi			
	or she is aware of the wage provisions described herein and shall of				
	with such provisions before commencing services.				
	Living Wages. This Contract is subject to the City's Living Wage				
	Ordinance (LWO), codified at SDMC sections 22.4201 through 22.4				
	LWO requires payment of minimum hourly wage rates and other be				
	unless an exemption applies. SDMC section 22.4225 requires each				
	Contractor to fill out and file a living wage certification with the				
	City Manager within thirty (30) days of Award of the Contract. LWO	wage			
	and health benefit rates are adjusted annually in accordance with S	SDMC			
	section 22.4220(b) to reflect the Consumer Price Index. Service				
	contracts, financial assistance agreements, and City facilities				
	agreements must include this upward adjustment of wage rates to	covered			
	employees on July 1 of each year. In addition, Contractor agrees to				
	require all of its subcontractors, sublessees, and concessionaires				
	subject to the LWO to comply with the LWO and all applicable regu	lations			
	and rules.	ilationo			
		ection			
	 Exemption from Living Wage Ordinance. Pursuant to SDMC se 22.4215, this Contract may be exempt from the LWO. For a determ 				
	on this exemption, Contractor must complete the Living Wage Ordi	nance			
	Application for Exemption.				
e Term	s and Conditions of this Purchase Order are available at http:	//www.sandiego.g	ov/purchasing/vendor		
				Line Item Total \$	26,696.
	IMPORTANT!			Tax \$	0.
	IIVIFUR I AIVI!			l	0.
ensure	e prompt payments, PO # must appear on all shipmer of Billing Contact person at Bill-To address listed above	nts and invoices:	all invoices must be	PO Total \$	26,696.