

City of San Diego PURCHASE ORDER

PO No. 4500105398

Date: 10/02/2018 Page 1 of 2

Ship To:

"POLICE-FIELD OPERATIONS, ADMIN" 1401 BROADWAY San Diego CA 92101-5710 Bill To:

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

Enrique Cortes Bonilla

Telephone:

E-Mail: ECORTESBONIL@PD.SANDIEGO

Vendor: Jolee J Brunton

Focus Psychological Services 444 Camino Del Rio S Ste 215 San Diego CA 92108-3510 Terms:

within 30 days Due net

Delivery Terms: FOB Destination

Buyer: Katrina McDonald

Telephone: 619 236-6038

Vendor ID: 10017074 Telephone: E-Mail: info@focuspsychservices.com E-Mail: KMM

E-Mail: KMMcDonald@sandiego.gov

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Line #	Serv#	Item ID/Description Service Description	Del.Date	Quantity/Ord UoM	Unit Price/Prc U Conv Factor	oM Exte	Extended Price		
1	HRS-INDIVIDUAL	EMPLOYEE COUNSELING	06/30/2019	2,500 HR	60.00 HI	USD	150,000.00		
	San Diego Police	Dept. / WELLNESS UNIT							
		ological services for all Police Department en /2018 to 06/30/2019							
		aret Mendez (619) 531-2793 MS710 ukochi (619) 531-2110 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 ATTN: Accounts F 1401 Broadway, N San Diego, CA 93	Payable MS-715							
***	Item partially deliv	rered							
2	EDUCATION & TR	RAINING	06/30/2019	370 HR	60.00 HI	R USD	22,200.00		
3	TRAUMA TREATI	MENT/CISD EMPLOYEE	06/30/2019	365 HR	60.00 HI	R USD	21,900.00		
4	FAMILY COUNSE	LING	06/30/2019	1,300 HR	60.00 HI	R USD	78,000.00		
***	Item partially deliv	vered							
5	MISC.(MANGEME	ENT CONSULT)	06/30/2019	50 HR	60.00 HI	R USD	3,000.00		
***	Item partially deliv	vered							
The Term	s and Conditions	of this Purchase Order are available at l	nttp://www.sandiego.go	ov/purchasing/vendor	SEE L	AST	PAGE		
IMPORTANT!						FOR TOTAL			
To ensur	re prompt payme to <i>Billing</i> Contac	ents, PO # must appear on all ship t person at <i>Bill-To</i> address listed al	ments and invoices;	all invoices must be					



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Line#	Item ID/Description Serv# Service Description	Del.Date	Quantity/Ord UoM	Unit Price/Prc Uom Conv Factor	Exte	nded Price
6	COUNTY WELLNESS MEETING	06/30/2019	18 HR	60.00 HR	USD	1,080.00
7	NEW OFFICER & FAMILY TRAINING Item partially delivered	06/30/2019	96 HR	60.00 HR	USD	5,760.00
8	WELLNESS UNIT RETREATS/CONSULT Item completely delivered	06/30/2019	48 HR	60.00 HR	USD	2,880.00
9	TREATMENT/CISD FAMILY Item completely delivered	06/30/2019	20 HR	60.00 HR	USD	1,200.00
10	PO MOD 4500105398 LINE 1 San Diego Police Dept. / WELLNESS UNIT PO Mod 4500105398, line 1 individual Employee Counseling Fi Amendment. Requestor: Margaret Mendez (619) 531-2793 MS710 Analyst: Ann Yasukochi (619) 531-2110 MS 715 PO number to be on all invoices. ***To ensure prompt payments please mail invoices within five to 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	2,500 HR	60.00 HR	USD	150,000.00	
The Term	Line Item Total S	<u> </u> ₿	436,020.0 0.0			
o ensure			436,020.00			