

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

PO No. | 4500105428

Date: 10/03/2018 Page 1 of 1

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:** Martha Luna

Telephone:

E-Mail: MELUNA@SANDIEGO.GOV

Vendor: Serving Seniors

525 14th Street Suite 200 San Diego CA 92101-7556 Terms:

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

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

E-Mail: AnaG@sandiego.gov

Vendor ID: 10008265 Telephone: E-Mail:

| Line#    | Item ID/Description Serv # Service Description  | Del.Date  | Quantity/Ord UoM     | Unit Price/Prc UoM<br>Conv Factor | Extended Price    |
|----------|---|---|----------------------|-----------------------------------|-------------------|
|          | Service Description   |   |                      | CONVI actor                       |                   |
| 1        | FY19 Serving Seniors  Reimbursement of eligible monthly expenditures to Serving Sercertain services and activities related to the Fresh Produce for Low-Income Seniors program, a Community Development Bloc thru the period ending June 30, 2019; provided that all reports a documentation required under the FY 2019 CDBG Agreement required by the Operating Manual and the Playing by the Rules are received by the City on such forms and in such manner as t may require, within 15 calendar days of the end of each reporting period. Reso-311700.  INSURANCE CERTIFICATES TO BE UPDATED AS REQUIRE | k Grant project,<br>and<br>including those<br>Handbook)<br>the City<br>ng | 51,453.84 EA         | 1.00 EA                           | USD 51,453.84     |
| The Term | Item partially delivered  s and Conditions of this Purchase Order are available at h  | nttn://www.sandiego.co  | ov/burchasing/vendor |                                   |                   |
|          | IMPORTANT!  |   |                      | Line Item Total S                 | 51,453.84<br>0.00 |
| To ensur | re prompt payments, PO # must appear on all shipr<br>to <i>Billing</i> Contact person at <i>Bill-To</i> address listed ab   | nents and invoices;   | all invoices must be | PO Total                          | 51,453.84         |