



# City of San Diego PURCHASE ORDER

**PO No. 4500106114**

**Date:** 10/24/2018 **Page 1 of 1**

<b>Ship To:</b> City of San Diego Billing Contact for Delivery Address 92101	<b>Bill To:</b> EMERGENCY MEDICAL SERVICES 1010 SECOND AVE SAN DIEGO CA 92101	<b>Billing Contact:</b> YESENIA GOMEZ  <b>Telephone:</b>  <b>E-Mail:</b> YGOMEZ@SANDIEGO.GOV
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<b>Vendor:</b> Rural Metro of San Diego Inc AMERICAN MEDICAL RESPONSE (AMR) PO Box 31001-1584 PASADENA CA 91110-1584	<b>Terms:</b> within 30 days Due net <b>Delivery Terms:</b> FOB Destination
<b>Vendor ID:</b> 10039353 <b>Telephone:</b> <b>E-Mail:</b> risk@management.com	<b>Buyer:</b> Ana Garcia <b>Telephone:</b> 619-236-6150 <b>E-Mail:</b> AnaG@sandiego.gov

Line #	Serv #	Item ID/Description Service Description	Del.Date	Quantity/Ord UoM	Unit Price/Prc UoM Conv Factor	Extended Price
1		<b>EMERGENCY AMBULANCE SERVICES AT AIRPORT</b>	07/01/2019	794,000 EA	1.00 EA	USD 794,000.00
****		Attached: 1) Agreement with Airport Authority for emergency ambulance services at Lindbergh Field (dated 09/05/17) 2) Ordinance O-20845 (dated 8/4/17) 3) EMS Agreement FOURTH AMENDMENT with Rural/Metro (through 6/30/20). 4) AMR CERTIFICATE OF INSURENCE DATED 3/29/2018(EFFECTIVE THROUGH3/31/2019)  PLEASE CONTACT PHIL BLAKE EMS ADMINISTRATIVE MANAGER 619-718-1071 Item partially delivered				

The Terms and Conditions of this Purchase Order are available at <a href="http://www.sandiego.gov/purchasing/vendor">http://www.sandiego.gov/purchasing/vendor</a>	<b>Line Item Total</b> \$ 794,000.00
<b>IMPORTANT!</b>	<b>Tax</b> \$ 0.00
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	<b>PO Total</b> \$ <b>794,000.00</b>