



Siskiyou County Purchase Order

PO Number: 401510-02.23-01

BILL TO: County of Siskiyou
311 Fourth St Rm 101
Yreka, CA 96097

Dept. Phone: 530-841-2127

PO Date: 02/07/23

Required Date

Vendor Contact: Travis LeFever

Vendor Phone: 336-815-5755

Vendor Fax:

Vendor Code:

Comments: Public Health RFP 22-01 Mobile Clinic
Contact Shelly Davis- 530-841-2140

Attention:

SHIP TO: County of Siskiyou
279 Sharps Rd
Yreka, CA 96097

Dept. Fax: 530-841-4094

Terms:

Shipping:

Vendor: Mission Mobile Medical

Vendor Address: 7700 Boeing Dr
Greensboro, NC 27409

Product Description	Part Number	Quantity	Unit Price	Extended Price
Mobile Clinic- 29' single exam layout		1	\$316,973.00	\$316,973.00
50% due at signing				\$0.00
25% due in 45 days				\$0.00
Final payment due before delivery				\$0.00
CA Taxes and registration not included				\$0.00
Delivery included				\$0.00
Sub-Total				\$316,973.00
0.00% Tax				\$0.00
Shipping				
Total				\$316,973.00

Vendor Quote Attached:

- Yes**
 No



Department Authorization

2/8/23

Date

2121 401015 762000

Budget Account Codes

Information Technology Approval
(Needed for Computer-Related Purchases Only)

Date

Auditor Approval

Date

CAO/Purchasing Agent Approval

Date

For Auditor Use Only

Reset Form