Bay View Playground In-Kind Grant

Ross Recreation Equipment, Inc. 100 Brush Creek Road, #206 Santa Rosa, California 95404 accounting@rossrec.com 707.538.3800

Attachment 1 - Equipment Credit Invoice

INVOICE



Bill To:

San Francisco Public Health Foundation 375 Laguna Honda Blvd. B303 San Francisco, CA 94116

Ship To:

Bay View Playground AKA MLK Park Carroll Avenue and 3rd Street San Francisco, CA

re BayView Playground AKA MLK Pa

Customer	Auth/PO #	Terms		Sales	person		Due Date	
100% On Or		100% On Order	r SS		SS		6/16/2017	
Item	Descriptio	'n	Qty I	nvoi	Rate		Amount	
Install- Surfacing	Installation of approximately 4000 ForeverLawn Playground Grass Su nailer board around perimeter. Se exclusions. Quoted at San Francisco Prevailing Project DIR # needed for State Pr	rfacing; includes e notes for g Wage Rate.	1.00	1.00	21,588.00		21,588.00	
Freight	Freight - Forever Lawn Turf 24 hr call		1.00	1.00	2,300.00		2,300.00	

Please Remit Payment to: Ross Recreation Equipment, Inc. 100 Brush Creek Road, #206 Santa Rosa, CA 95404

Subtotal	\$167,934.00
Sales Tax (8.5%)	\$12,014.41
Total	\$179,948.41
Payments/Credits	-\$30,000.00
Balance Due	\$149,948.41

Bay View Playground Grant In-Kind

Attachment 1 - Equipment Credit Invoice

SAN FRANCISCO PUBLIC HEALTH FOUNDATION (Tax ID# 94-3117093) 375 Laguna Honda Blvd. B303 San Francisco, CA 941116 PH 415-932-6383 • FAX 415-520-0471 Email: <u>peardley@sfpublichealthfoundation.org</u> www.sfpublichealthfoundation.org

PROGRAM DISBURSEMENT REQUEST FORM

Bayview HEAL Zone

1-6-15 Date: 707-538-3800 **Ross Recreation Equipment** Phone: Name of Payee: Address: 100 bush creek road, ste 206, santa rosa, ca95404 30000 Next run Amount Requested: Date Needed: Christina Goette 581-2422 Requested by: Phone: 30 vN ste 2300 Address: MLK park playground equipmetn Purpose of Request: x Mailed to the Payee Mailed to the Requester Check should be: EXPENSE CATEGORY Open Truth Salaries/BVHPF 30000 MLK Park Other 30000 TOTAL Date Project Director or designee: DPH Deputy Director:

(Deputy Director's signature is required for requests of \$1,500 or more.)

Attach original invoice(s) and receipt(s) to this Disbursement Request. Keep a copy of the invoice(s), receipt(s) and Disbursement Request for your files. (rev. 7/11)

Bay View Playground Grant In-Kind



INVOICE

Building Community since 1973

Bill To:

BayView HEAL Zone 1625 Carroll Ave. San Francisco, CA 94124

Invoice Number	Date
96589	3/16/2015

Ship To:

Bay View Playground AKA MLK Park Carroll Avenue and 3rd Street San Francisco, CA

re Bay View Playground AKA MLK P

Customer Auth/PO # Deposit		Terms 100% On Order		Sales	Due Date 3/16/2015	
Item	D	Description		Invoiced	Rate	Amount
Evos	Evos Structure - for MLK Park	Bay View Playground AKA		1	27,586.21	27,586.21T

Please Remit Payment to: Ross Recreation Equipment, Inc. 100 Brush Creek Rd. Suite #206 Santa Rosa, CA 95404

Phone # 707.538.3800 Fax # 707.538.3826

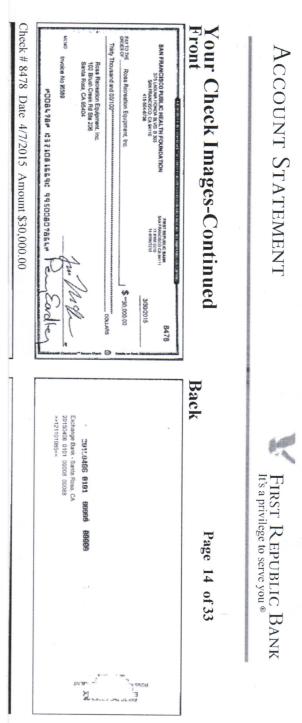
Subtotal	\$27,586.21
Sales Tax (8.75%)	\$2,413.79
Total	\$30,000.00
Payments/Credits	\$0.00
Balance Due	\$30,000.00

www.rossrec.com

accounting@rossrec.com

4

Bay View Playground Grant In-Kind



5

Equipment Credit and Payment Records

SAN FRANCISCO PUBLIC HEALTH FOUNDATION

(Tax ID# 94-3117093)

375 Laguna Honda Blvd. Ste B303 • San Francisco, CA 94116 PH 415-504-6738 • FAX 415-520-0471 Email: peardley@sfphf.org, apetroscva@sfphf.org • www.sfphf.org

PROGRAM DISBURSEMENT REQUEST FORM

Bayview HEAL Zone 2.0

Date:	June 16, 2017				
Name of Payee:			ne:		
Address:	100 Brush Creek Road, #206	F	ax:		
	Santa Rosa, CA 95404		nail:		
Amount Requested:	\$149,948.41	Date Need	led: asap		
Requested by:	Christina Goette	Pho	ne:	628-206-7630	
Address:	25 Van Ness Ave, Ste 500	the Statistic Contraction of the			
Aut 635.	San Francisco, CA 94102				
Purpose of Request:		NOJATIONS			
Check should be:	x Mail to Payee	Mail to Requester	1.		
	Operating Exp	enses			
	Meeting Expenses	\$	Description Plana		
	Training/Conferences	\$			
	Travel	\$			
	Incentives	\$	and the state		
	Office Supplies	\$			
	Equipment	\$			
	Communications	\$			
	Printing	\$			
	Subcontracts/Co	onsultants			
· · · · · · · · · · · · · · · · · · ·	Action Fund - General	\$	and the last		
	Action Fund - MLK Park	\$ 149,848.41			
	Action Fund - Urban Ag	\$			
 R01,079-01 	BVHPF	\$			
	Food Access Support	\$	1000 C		
	SFUSD	\$			
	Shuttle Pilot	\$	a line an bein		
	Social Marketing				
	Stipends	\$			
	Water Station Consultants	\$			
	NunAt	TAL \$149,948.4 1	New College		
Project Director or design	gnee:	de la construcción de la constru)ate:(6/16/2017	
PHD Manager:	(A PHD Manager's signature is required		Date:	1 ~ 11/	

Attach original involce(s) and receipt(s) to this Disbursement Request. Keep a copy of everything for your records.

(rev 9/16)

