Boyd ISD Purchasing

| Bid Information | | Contact I | Contact Information | | Ship to Information |
|---|---|--|---|-----------------|---|
| Bid Owner | Summer Mathis | Address | 600 Knox Ave. | | Address SAME |
| Email Phone Fax Bid Numbe Title Bid Type Issue Date Close Date | School Furniture RFP 01/14/2019 | Contact Department I Building Floor/Room Telephone Fax Email | Boyd, TX 76023 Summer Mathis Purchasing Administration (940)433-2327 (940)433-9569 smathi@boydisc | | Contact Department Building Floor/Room Telephone Fax Email |
| Supplier | r Information | | S | upplier Notes | 8 |
| | ny Name | | | ••• | |
| Contact | Name | | | | |
| Address | | | | | |
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| Telepho | one | | | | |
| Fax | | | | | |
| Email | | | | | |
| By subn | nitting your response, you c | certify that you are a | uthorized to r | epresent an | d bind your company. |
| Signatu | re | | D | ate/ | <u> </u> |
| Bid Note | es | | | | |
| Library a even if y | and Miscellaneous Furnitur you are a sole source provi CT deadline. | e. This is a Catalog/l | Discount RF | P. BISD urge | f various types of School, Office, Science, es all Vendors to please respond to this bid FP are due on or before June 20, 2022 at |
| | | | | | |
| Bid Mes | ssages | | | | |
| Bid Atta | chments | | | | |
| The follow | ving attachments are associated w | vith this opportunity and v | will need to be re | etrieved separa | ely |
| # | Filename | Description | | | |
| Header | RFP 2022-06-001 School Furniture - I. Notice to Offerors.pdf | Notice to Offerors | | | |
| Header | RFP 2022-06-001 School Furniture - II. Instructions to Offerors.pdf | Instructions to Offeror | rs | | |
| Header | RFP 2022-06-001 School Furniture - III. General Conditions.pdf | General Conditions | | | |

Header RFP 2022-06-001 School Responsibilities of Offerors
Furniture - IV. Responsibilities of Offerors.pdf

Header RFP 2022-06-001 School Specifications.pdf

Header RFP 2022-06-001 School Line Items

Bid Attachments Requested

The following attachments are requested with this opportunity

Furniture - VI. Line Items.pdf

Bid Attributes

| Ple | ase review the following and respond where ne | cessary | |
|-----|---|---|------------|
| # | Name | Note | Response |
| 1 | Notice to Proposers | Proposers are required to read, understand and acknowledge agreement Notice to Proposers included in the 'Attachments' section of this solicitation. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 2 | Instruction to Offerors | Proposers are required to read, understand and acknowledge agreement with the Instructions to Offerors included in the 'Attachments' section of this of this solicitation. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 3 | General Conditions | Proposers are required to read, understand and acknowledge agreement with the General Conditions included in this 'Attachments' section of this solicitation. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 4 | Responsibilities of Offerors | Proposers are required to read, understand and acknowledge agreement with the Responsibilities of Offerors included in the 'Attachments' section of this solicitation. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 5 | Specifications/Scope of Services | Proposers are required to read, understand and acknowledge agreement with the Specifications/Scope of Services included in the 'Attachments' section of this solicitation. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 6 | Services Offered | Do you provide services? If yes, please attach price list in the Response Attachments tab with an explanation of the services you provide, how you provide them, what makes them unique, and why BISD needs these services from your company. Prices/pricing must be attached for your contract to cover any services. Valid Responses: [Please Select], Yes, No | (Optional) |
| 7 | Purchase Order/Quote Contact Name | Proposer shall provide the contact name of the individual that is responsible for purchase orders and quotes. | (Required) |
| 8 | Purchase Order/Quote Phone Number | Proposer shall provide the phone number of the individual that is responsible for purchase orders and quotes. | (Required) |
| 9 | Purchase Order/Quote Fax Number | Proposer shall provide the fax number of the individual that is responsible for purchase orders and quotes. | (Required) |

| 10 | Purchase Order/Quote Email Address | Proposer shall provide the email address of the individual_that is responsible for the purchase orders and quotes. | (Required) |
|----|------------------------------------|--|------------|
| 11 | How to Place an Order | Please provide brief description of how to place an order with your company. | (Required) |
| 12 | Company Website | Please provide your company's website address. This should be a page that describes the products/services matching this solicitation. | (Required) |
| 13 | Company Address: Street | Please provide your company address, Street including suite number. | (Required) |
| 14 | Company Address: City | Please provide your company address, City. | (Required) |
| 15 | Company Address: State | Please provide your company address, State. | (Required) |
| 16 | Company Address: Zip Code | Please provide your company address, Zip Code. | (Required) |
| 17 | Freight Charges | Please select if you are providing BISD with Free Freight on all orders or Pre-Paid and Add (Invoice) Valid Responses: [Please Select], Free Freight (FF), Pre-Pay and Add (Invoice) | (Required) |
| 18 | Accept Purchase Orders | Does your company accept PO's and take payment on NET30 terms to allow BISD to pay with a check after the service or product is delivered? Valid Responses: [Please Select], YES, NO | (Required) |
| 19 | Return Policy | Please state your return policy on items purchased under this solicitation. | (Required) |
| 20 | Online Order Link (if applicable) | Please provide website address for processing orders online (if applicable). | (Optional) |
| 21 | Payment/Remittance Contact Name | Proposer shall provide the contact name of the individual that is responsible for payment remittance. | (Required) |
| 22 | Payment/Remittance Phone Number | Proposer shall provide the phone number of the individual_that is responsible for payment remittance. | (Required) |
| 23 | Payment/Remittance Fax Number | Proposer shall provide the fax number of the individual that is responsible for payment remittance. | (Required) |
| 24 | Payment/Remittance Email Address | Proposer shall provide the email address of the individual_that is responsible for payment remittance. | (Required) |
| 25 | Payment/Remittance Address | Proposer shall provide the location including street address, city, state, and zip code for checks to be mailed when paying invoices. | (Required) |
| 26 | Principal Place of Business | State whether the proposer or proposer's ultimate parent company or majority owner has its principal place of business in this state (Texas). Valid Responses: [Please Select], Yes, Texas is our principal place of business, No, Texas is not our principal place of business | (Required) |
| 27 | Employees in State | State whether the proposer or the proposer's ultimate parent company or majority owner employs at least 500 persons in this state (Texas). Valid Responses: [Please Select], Yes, our company employs over 500 in Texas, No, our company does not employ over 500 in Texas | (Required) |
| 28 | FTEs | How many full time staff positions does your company employee? | (Required) |

| 29 | Years in Business | How many years has your company been in business? | (Required) |
|----|-----------------------------------|---|------------------------|
| 30 | Diversity Classification | Please indicate if your company is currently a Minority-Owned, Woman Owned, or Historically Underutilized Business. If your company holds none of these, please indicate by selecting NONE. Valid Responses: [Please Select], MBE, WBE, SBE, HUB, NONE | (Required) |
| 31 | References | The proposer is to submit three (3) references that have contracted with their company to provide like products and/or services. Include the entity name, phone number, contact person, and email address. It is recommended that the proposer use school districts or other local governmental agencies equal to BISD in size and structure, if possible. | (No Response Required) |
| 32 | Reference #1 Entity Name | Include the entity name for Reference #1 | (Required) |
| 33 | Reference #1 Contact Person | Include the contact person for Reference #1 | (Required) |
| 34 | Reference #1 Phone Number | Include the phone number for Reference #1 | (Required) |
| 35 | Reference #1 Email Address | Include the email address for Reference #1 | (Required) |
| 36 | Reference #2 Entity Name | Include the entity name for Reference #2 | (Required) |
| 37 | Reference #2 Contact Person | Include the contact person for Reference #2 | (Required) |
| 38 | Reference #2 Phone Number | Include the phone number for Reference #2 | (Required) |
| 39 | Reference #2 Email Address | Include the email address for Reference #2 | (Required) |
| 40 | Reference #3 Entity Name | Include the entity name for Reference #3 | (Required) |
| 41 | Reference #3 Contact Person | Include the contact person for Reference #3 | (Required) |
| 42 | Reference #3 Phone Number | Include the phone number for Reference #3 | (Required) |
| 43 | Reference #3 Email Address | Include the email address for Reference #3 | (Required) |
| 44 | Credit Card Acceptance or ACH? | Can you take payments via credit card or ACH? Valid Responses: [Please Select], YES, NO | (Required) |
| 45 | Credit Card Terms | Do you charge an additional fee for paying by credit card?_ | (Required) |
| 46 | Indemnification and Hold Harmless | Except as otherwise expressly provided, Offeror shall defend, indemnify, and hold BISD harmless from and against all claims, liability, loss and expenses, including reasonable costs, collection expenses, and attorneys' fees incurred, which arise by reason of the acts or omissions of Offeror, its agents or employees in the performance of its obligations under this contract. This clause shall survive termination of this contract. | (Required) |
| 47 | Resident Bidder | Texas Government Code Chapter 2252.001A (3) and (4) defines "resident" and "nonresident" bidder as follows: Valid Responses: [Please Select], Resident bidder of Texas, Nonresident bidder of Texas | (Required) |
| 48 | Contractor Certification | Texas Education Code Chapter 22 requires service contractors to obtain criminal history record information regarding covered employees and to certify to the District that they have done so. Covered employees with disqualifying convictions are prohibited from serving at a school district. Valid Responses: [Please Select], None of the employees | (Required) |

covered, If covered - criminal history obtained? if covered - employee disqualifying conviction?, Upon request, criminal history records available Affidavit of Authority and Non-collusion I affirm I am of lawful age, being first duly sworn, on oath (Required) says, that (s) he is the agent authorized by the Proposal to submit the attached Proposal. Affiant further states that the proposer has not been a party to any collusion among Proposals/proposers in restraint of freedom of competition by agreement to Proposal at a fixed price or to refrain from proposing; or with any state official, District employee, Board Member, or benefit consultant as to quantity, quality, or price in the prospective contract, or any other terms of said prospective contract, or in any discussion or actions between Proposals/proposers and any state official, District employee, Board Member, or benefit consultant concerning exchange of money or other things of value for special consideration in the letting of this contract Valid Responses: [Please Select], I affirm, I do not affirm Debarment or suspension certification form Non-Federal entities are prohibited from contracting with 50 (Required) or making sub-awards under covered transaction to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement of goods or services equal to or in excess of \$100,000. Contractors receiving individual awards of \$100,000 or more and all sub-recipients must certify that the organizations and its principals are not suspended or debarred. Valid Responses: [Please Select], Certify No Suspension or Debarment, Do not certify Statutory citation covering notification of criminal history of_ Felony Conviction and Criminal History Notice (Required) contractor is found in the Texas Education Code, Section 44.034. Following is an example of a felony conviction Valid Responses: [Please Select], Publicly Held Corporation (Notice Not Required), Firm is NOT owned nor operated by convicted felon, Firm IS owned or operated by convicted felon Boycott Israel This is a requirement for vendors competing on (Required) government contracts to declare that, at the time of they are seeking to contract with a government entity they 1) do not boycott Israel, and 2) they will not boycott Israel during the term of the contract with the government entity. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and "Company" means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company, or affiliate of those entities or business associations that exist to make a profit. This requirement became effective on September 1, 2017 resulting from the passage of House Bill 89. (pursuant to Texas Government Code §2270 and \$808.001). Statement of Compliance/Deviation Form We hereby acknowledge receipt of the above referenced (Optional) procurement opportunity, and certify that our Proposal

are covered employees, Some or all of the employees are

confirms to the RFP except as detailed here.

| 54 | Statement of Compliance/Deviation Form Authorized Official | Authorized Company Official's Name | (Optional) |
|----|--|--|------------------|
| 55 | Statement of Compliance/Deviation Form Authorized Official | Email address of Authorized Official | (Optional) |
| 56 | Company Contact #1 | Name | (Required) |
| 57 | Company Contact #1 | Title | (Required) |
| 58 | Company Contact #1 | Phone | (Required) |
| 59 | Company Contact #1 | Email | (Required) |
| 60 | Company Contact #2 | Name | (Required) |
| 61 | Company Contact #2 | Title | (Required) |
| 62 | Company Contact #2 | Phone | (Required) |
| 63 | Company Contact #2 | Email | (Required) |
| 64 | Annual Sales 2015 | | \$ (Optional) |
| 65 | Annual Sales 2016 | | \$(Optional) |
| 66 | Annual Sales 2017 | | \$(Optional) |
| 67 | Year-to-date (YTD) Sales 2018 | | \$(Optional) |
| 68 | Proposal | In 100 words or less, describe what makes your firm uniquely qualified to provide the goods and/or services as outlined in the Proposal, including any superior qualities your firm possesses that would benefit the district. | (Required) |
| 69 | Firm Background and Staff | Year present firm established | (Required) |
| 70 | Firm Background and Staff | Name of parent company, if any | (Required) |
| 71 | Firm Background and Staff | Address of parent company | (Required) |
| 72 | Firm Background and Staff | List principals of firm | (Required) |
| 73 | Firm Background and Staff | Former company name(s)and year(s) established | (Required) |
| 74 | Professional Associations | License #s or Professional Association you are a member_ of that enhances the service expectation to BISD (if any) | (Optional) |
| 75 | Organization and Staff Experience | Offerors must describe their qualifications and experience_to perform the work described in this Request for | (Required) |
| 76 | Personal liability insurance | Describe limits per project. | (Required) |
| 77 | School District Experience | Has your company provided services to school districts? If_yes, please list three K-12 districts: | (Required) |
| 78 | Has your firm lost any contracts within the last year due to performance issues? | If yes, please explain. | (Required) |
| 79 | State that you will provide a copy of your company's financial statements for the past two | | (Required) |

| | (2) years, if requested by the District. | | |
|----|---|---|------------|
| 80 | Is your company currently for sale or involved in any transaction to expand or to become acquired oby another business entity? | If yes, please explain the impact both in organizational and_ lirectional terms. | (Required |
| 81 | Provide any details of all past or pending litigation or claims filed against your company | | (Required) |
| 82 | Is your company currently in default on any loan agreement or financing agreement with any bank, financial institution, or other entity. If yes, specify date(s), details, circumstances, and prospects for resolution. | If yes, please explain | (Required) |
| 83 | Does any relationship exist whether by relative, business associate, capital funding agreement or cany other such kinship exists between your company and any of the District's employees? | Visit https://www.ethics.state.tx.us/ to complete the conflict_ of interest questionnaire Valid Responses: [Please Select], Yes, No | (Required) |
| 84 | What difficulties do you anticipate in serving the District and how do you plan to manage these and what assistance will you require from the District? | | (Required |
| 85 | Describe your company's service support philosophy, how is it carried out, and how success in keeping this philosophy is measured. | | (Required |
| 86 | Describe your company's quality assurance program, what are your company's requirements, and how are they measured? | | (Required |
| 87 | Provide a list of any services not specified in this RFP that your company will provide to BISD. | | (Required) |
| 88 | Provide details regarding any special services, product characteristics, other benefits or advantages offered to BISD by selecting your company. | | (Required) |
| 89 | COMMITMENT TO PROVIDE INSURANCE | If the Bidder shown below is awarded this contract by BISD, the bidder will be able to, within ten (10) days of notification of such award, furnish a valid insurance certificate to the BISD Purchasing Department, meeting all of the insurance requirements in this bid. Can you meet the insurance requirements below? Valid Responses: [Please Select], Yes, No | (Required |
| 90 | Educational Purchasing Cooperative of North Texas (EPCNT) Inter-local Agreement Consent Form | This contract may be utilized for purchases by other local government entities under an inter-local cooperation agreement, Texas Government Code Chapter 791. Any contract awarded by BISD on behalf of another local government entity shall be contingent upon the issuance of a purchase order or execution of a separate contract by the other local government entity. The contractor must deal directly with the local government entity concerning the placement of orders, issuance of the purchase order, insurance certificates, contractual disputes, invoicing and payment or any other terms and conditions that the local entity may require. The actual utilization of this contract award by the other local government entity is at the sole discretion of that other local government entity. BISD is acting on the behalf of other local government entities for the sole purpose of complying with Texas competitive bidding requirements and shall not be held liable for any costs, damages, etc. incurred by any bidder with regard to | (Required) |

| | | any purchase by another local government entity. BISD shall be legally responsible only for payment of goods and services in the quantities detailed in the BISD purchase order or contract. BISD is a member of the Educational Purchasing Cooperative of North Texas (EPCNT) and acceptance would make this award available to the cooperative member districts. Do you agree to participate? Valid Responses: [Please Select], Yes, No | |
|----|---|--|------------|
| 91 | Federal Contract Provisions and Certifications | Required Federal contract provisions of Federal Regulations for Contracts for contracts with Boyd ISD Valid Responses: Response Not Needed | (Optional) |
| 92 | Contracts for more than the simplified acquisition threshold set at \$250,000.00 | Contracts for more than the simplified acquisition threshold_currently set at \$250,000, which is the inflation adjusted amount determined by the Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) as authorized by 41 U.S.C. 1908, must address administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 93 | Termination for cause and for convenience by the grantee or sub-grantee including the manner by which it will be effected and the basis for settlement. (All contracts in excess of \$10,000) | Pursuant to Federal Rule (B) above, when federal funds are expended by BISD, BISD reserves the right to terminate any agreement in excess of \$10,000 resulting from this procurement process for cause after giving the vendor an appropriate opportunity and up to 30 days, to cure the causal breach of terms and conditions. BISD reserves the right to terminate any agreement in excess of \$10,000 resulting from this procurement process for convenience with 30 days' notice in writing to the awarded vendor. The vendor would be compensated for work performed and goods procured as of the termination date if for the convenience of the BISD. Any award under this procurement process is not exclusive and the District reserves the right to purchase goods and services from other vendors when it is in the best interest of the District. Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 94 | Clean Air and Water Act | Clean Air Act (42 U.S.C. 7401-7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251-1387), as amended—Contracts and sub-grants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401-7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251-1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA). Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |
| 95 | Debarment and Suspension | Debarment and Suspension (Executive Orders 12549 and 12689)—A contract award (see 2 CFR 180.220) must not be made to parties listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), "Debarment and Suspension." SAM Exclusions contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549. Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |

| 96 | Byrd Anti-Lobbying Amendment | Byrd Anti-Lobbying Amendment (31 U.S.C. 1352)—Contractors that apply or bid for an award exceeding \$100,000 must file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the non-Federal award. Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |
|-----|--|---|------------|
| 97 | Federal Rule Compliance | Federal Rule Compliance with all applicable standards, orders, or requirements issued under section 306 of the Clean Air Act (42 U.S.C. 1857(h)), section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and Environmental Protection Agency regulations (40 CFR part 15). (Contracts, subcontracts, and sub-grants of amounts in excess of \$100,000) Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |
| 98 | Energy Policy and Conservation Act | Federal Rule Compliance with Mandatory standards and policies relating to energy efficiency which are contained in the state energy conservation plan issued in compliance with the Energy Policy and Conservation Act (Pub. L. 94-163, 89 Stat. 871). Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |
| 99 | Solid Waste Disposal Act | Solid Waste Disposal Act - 2 CFR Ch. II (1–1–15 Edition) § 200.322 Procurement of recovered materials. Valid Responses: [Please Select], Agree, Disagree | (Optional) |
| 100 | Discrimination | Discrimination Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 101 | Equal Employment Opportunity | Equal Employment Opportunity Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 102 | Patent Rights, Copyright, and Rights | Patent Rights, Copyright, and Rights Valid Responses: [Please Select], Agree, Disagree | (Optional) |
| 103 | FOR CONSTRUCTION OR PUBLIC WORKS PROJECTS: Copeland Anti-Kickback Act | Copeland Anti-Kickback Act Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 104 | FOR CONSTRUCTION OR PUBLIC WORKS PROJECTS -Davis-Bacon Act | Davis-Bacon Act Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 105 | FOR CONSTRUCTION OR PUBLIC WORKS PROJECTS - Contract Work Hours and Safety Standards Act | Contract Work Hours and Safety Standards Act Valid Responses: [Please Select], Agree, Disagree | (Required) |
| 106 | Health and Safety Certifications, Licensing and Regulations | Pursuant to Federal Rule (J) above, when federal funds are expended by BISD, BISD requires proposer to certify that during the term of an award by the BISD resulting for this procurement process the vendor will be in compliance with mandatory standards and policies relating to observance of applicable local, state, or federal health and safety certifications, licensing, or regulations. Valid Responses: [Please Select], Certify, Do Not Certify | (Required) |

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| Qty | y UOIVI | Description | | Response | |
| 1 | EA | Discount (%) Off Cat discount (%) off catal | talog/Pricelist for All Auditorium Seating Furniture. Please state the log/pricelist. | | |
| Ma | nufacturer: | | Manufacturer #:_ | | |
| IVIA | mulacturer. | | | (Optional) % Discount | |
| Iter | m Notes: All Au | ditorium/Cafeteria Seating | | | |
| Fur | rniture. Suppl <u>ier</u> | Notes: | | | |
| Iten | n Attributes: Pleas | se review the following and re | espond where necessary | | |
| # | Name | | Note Response | | |
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| 1 | EA | Discount (%) Off Cata off catalog/pricelist. | alog/Pricelist for All Library Furniture. Please state the discount (%) | | |
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| 1 | EA | Discount (%) Off Catalog/Pric off catalog/pricelist. | elist for All School Furniture. Please state the discount (%) | |
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| | | | | (Optional) % Discount |
| Iten | n Notes: All Sch | nool Furniture | | |
| Sup | pplier Notes: | | | |
| Item | Attributes: Pleas | se review the following and respond wh | nere necessary | |
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| 1 | EA | Discount (%) Off Catalog/Pric off catalog/pricelist. | elist for All Science Furniture. Please state the discount (%) | |
| Mar | nufacturer: | - | Manufacturer #: | |
| | | | | (Optional) % Discount |
| Iten | n Notes: All Sci | ence Furniture | | |
| Sup | pplier Notes: | | | |
| Item | Attributes: Pleas | se review the following and respond wh | nere necessary | |
| # | Name | Note | Response | |
| 1 | Science Furnitu | ff Catalog/Pricelist for All ire. Please state the f catalog/pricelist. | (Optional) | % |
| 1 | EA | Discount (%) Off Catalog/Pricediscount (%) off catalog/pricel | elist for All Modular Furniture, New. Please state the | |
| Mar | nufacturer: | aleggant (70) on satalog/phosi | | |
| | | | - | (Optional) % Discount |
| Iten | n Notes: All Mo | dular Furniture, New | | |
| Sup | oplier Notes: | | | |
| Item | Attributes: Pleas | se review the following and respond wh | nere necessary | |
| # | Name | Note | Response | |
| 1 | Modular Furnitu | ff Catalog/Pricelist for All Ire, New. Please state the f catalog/pricelist. | (Optional) | % |
| 1 | EA | Discount (%) Off Catalog/Pric discount (%) off catalog/pricel | elist for All Modular Furniture, Refurbished. Please state the ist. | |
| | nufacturer: | | Manufacturer #: | |
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| | n Notes: All Mo | dular Furniture, Refurbished | | % Discount |

| | ili Allibules. I leas | se review the following and respond where necessary | |
|---------------------------------|---|--|--------------------------|
| # | Name | Note Response |) |
| 1 | Modular Furnitu | ff Catalog/Pricelist for All ure, Refurbished. Please unt (%) off catalog/pricelist. (Optional) | % |
| 1 | EA | Discount (%) Off Catalog/Pricelist for All Filing Cabinets. Please state the discount (% catalog/pricelist. |) off |
| Ma | anufacturer: | Manufacturer #: | |
| | | | (Optional) % Discount |
| Ite | em Notes: All Filir | ng Cabinets | |
| Su | upplier Notes: | | |
| Ite | em Attributes: Pleas | se review the following and respond where necessary | |
| # | Name | Note Response | |
| 1 | | ff Catalog/Pricelist for All . Please state the discount pricelist. (Optional) | % |
| 1 | EA | Discount (%) Off Catalog/Pricelist for All Moveable Walls and Partitions. Please state discount (%) off catalog/pricelist. | the |
| Ma | anufacturer: | Manufacturer #: | |
| | | | % Discount |
| | | veable Walls and Partitions | |
| Su | upplier Notes: | | |
| Su | upplier Notes: | se review the following and respond where necessary | |
| Su Iter | upplier Notes: em Attributes: Pleas Name | se review the following and respond where necessary Note Response |) |
| Su | upplier Notes: em Attributes: Pleas Name Discount (%) O Moveable Walls | se review the following and respond where necessary | e) |
| Su Iter | upplier Notes: em Attributes: Pleas Name Discount (%) O Moveable Walls | Se review the following and respond where necessary Note Response If Catalog/Pricelist for All S and Partitions. Please Unit (%) off catalog/pricelist. Discount (%) Off Catalog/Pricelist for All Window Treatments. Please state the discout (%) off catalog/pricelist. | e |
| Su Iter # 1 | em Attributes: Pleas Name Discount (%) O Moveable Walls state the discou | Se review the following and respond where necessary Note Response If Catalog/Pricelist for All So and Partitions. Please Int (%) off catalog/pricelist. Discount (%) Off Catalog/Pricelist for All Window Treatments. Please state the discount | e% |
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| 11 | 1 | EA | Discount (%) Off Catalog/Pricelist for All Other Furniture (for example; risers, stagi platforms). Please state the discount (%) off catalog/pricelist. | ng and |
|----|------|------------------------|---|--------------------------|
| | Ma | nufacturer: | Manufacturer #: | % |
| | | | | (Optional) % Discount |
| | Iter | m Notes: All Oth | ner Furniture (for example; risers, staging and platforms) | |
| | Sup | oplier Notes: | | |
| | Item | n Attributes: Plea | se review the following and respond where necessary | |
| | # | Name | Note Respo | ense |
| | 1 | Other Furniture | Off Catalog/Pricelist for All e (for example; risers, (Optionatforms). Please state the | nal) |
| | | | ff catalog/pricelist. | |
| 12 | 1 | | Please list any exceptions: | |
| | Ma | nufacturer: | Manufacturer #: | |
| | | | | (Optional) % Discount |
| | Iter | n Notes: Excep | otions | |
| | Sup | oplier Notes: | | |
| | Item | n Attributes: Plea | se review the following and respond where necessary | |
| | # | Name | Note Respo | nse |
| | 1 | Exceptions | | (Optional) |