

## Vendor's Offer

**"Return this Section with your Response"**

It is REQUIRED that Bidder COMPLETE, SIGN and SUBMIT the original of this form to the City Procurement Office with the bid response offer. An unsigned "Vendor's Offer", late bid response and/or a materially incomplete response will be considered nonresponsive and rejected.

Bidder is to type or legibly write in ink all information required below.

Company Name:	<u>Horizon Distributors Inc</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>5214 South 30th Street</u>		
City, State, Zip:	<u>Phoenix, Az 85040</u>		
Contact Person:	<u>Kevan Lawrence</u>	Phone Number:	<u>602-305-6054</u>
E-mail Address:	<u>kevan.lawrenc@horizononline.com</u>	Cell Number:	<u>N/A</u>
<b>Remit To Information</b>			
Company Name (as it appears on invoice):	<u>Horizon Distributors Inc</u>		
Company Payment Remit To Address :			
Street Address:	<u>P.O. Box 52758</u>		
City, State, Zip:	<u>Phoenix, Az 85040</u>		
<b>Company Tax Information</b>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	<u>07-582307-N</u>		
<b>Payment Options</b>			
Will your company accept the City's Master Card for payment?	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>
Will your company accept Payment via ACH (Automated Clearing House) for payment?	Yes	<input type="checkbox"/>	No <input checked="" type="checkbox"/>

### THIS BID IS OFFERED BY

#### REQUIRED SIGNATURE OF AUTHORIZED OFFEROR (MUST SIGN IN INK)

By signing this offer, Bidder acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other bidder or potential bidder. Failure to sign and return this form with bid response will be considered nonresponsive and rejected.

	<u>Dec-7-2015</u>
Signature of Authorized Offeror	Date
<u>Kevan Lawrence</u>	<u>sales</u>
Print or Type Name of Authorized Individual	Title of Authorized Individual

original

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Bidder is to type or legibly write in ink all information required below.

Company Name: Ewing Irrigation Products

Company Purchase Order Mailing Address:

Street Address: 18 S. Roosevelt Ave.

City, State, Zip: Chandler, AZ 85226

Contact Person: Doug Donahue Phone Number: 480-619-9943

E-mail Address: d.donahue@ewingirrigation.com Cell Number: 480-619-9943

Remit To Information

Company Name (as it appears on invoice): Ewing

Company Payment Remit To Address :

Street Address: 3441 E. Harbour Drive

City, State, Zip: Phoenix, AZ 85034

Company Tax Information

If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: Tempe branch in county  
State sales tax # 07-359650 15kend

Payment Options

Will your company accept the City's Master Card for payment? Yes  No

Will your company accept Payment via ACH (Automated Clearing House) for payment? Yes  No

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Douglas J. Donahue 12-9-15  
 Signature of Authorized Offeror Date  
Douglas J. Donahue Account Manager  
 Print or Type Name of Authorized Individual Title of Authorized Individual

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Company Name:	<u>SiteOne Landscape Supply</u>	
Company Purchase Order Mailing Address:		
Street Address:	<u>Bid Dept: SiteOne Landscape Supply</u>	<u>Local: 623 S. Perry Ln.</u>
City, State, Zip:	<u>1385 East 36th Street</u> <u>Cleveland, Ohio 44114</u>	<u>Tempe AZ 85281</u>
Contact Person:	<u>Bids Department</u>	Phone Number: <u>800-321-5325 x:2550</u>
E-mail Address:	<u>bids@SiteOne.com</u>	Cell Number: _____
<u>Remit To Information</u>		
Company Name (as it appears on invoice):	<u>SiteOne Landscape Supply</u>	
Company Payment Remit To Address :		
Street Address:	<u>24110 Network Pl.</u>	
City, State, Zip:	<u>Chicago, IL 60673-1241</u>	
<u>Company Tax Information</u>		
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	<u>07453696</u>	
<u>Payment Options</u>		
Will your company accept the City's Master Card for payment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Will your company accept Payment via ACH (Automated Clearing House) for payment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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<u>Molly M. Vorous</u>	<u>12/8/15</u>
Signature of Authorized Offeror	Date
<u>Molly M. Vorous</u>	<u>Senior Bid Rep.</u>
Print or Type Name of Authorized Individual	Title of Authorized Individual