

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	Cummins Rocky Mountain			
Company Purchase Order Mailing Address:				
Street Address:	651 North 101 st Avenue			
City, State, Zip:	Avondale, AZ 85323			
Contact Person:	Phil Cochren	Phone Number:	480-748-0484	
E-mail Address:	Phil.cochren@cummins.com	Cell Number:	480-748-0484	
Remit To Information				
Company Name (as it appears on invoice):	Cummins Rocky Mountain			
Company Payment Remit To Address :				
Street Address:	651 N 101 st Ave.			
City, State, Zip:	Avondale, AZ 85323			
Company Tax Information				
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:				
Payment Options				
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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

Date

4/22/16

Doug Varner

General Manager

Vendor's Offer

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Company Name:	Auto Safety House		
Company Purchase Order Mailing Address:			
Street Address:	2630 W. Buckeye Road		
City, State, Zip:	Phoenix, Az. 85009		
Contact Person:	Stan Costantino	Phone Number:	602-269-9721
E-mail Address:	scostantino@autosafetyhouse.com	Cell Number:	480-450-3427
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Auto Safety House		
Company Payment Remit To Address :			
Street Address:	2630 W. Buckeye Road		
City, State, Zip:	Phoenix, Az. 85009		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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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Signature of Authorized Offeror

4-18-16

Date

Stan Costantino

Sales Manager

Michael Greene

Michael Greene, C.P.M., CPPO
Procurement Administrator

Vendor's Offer

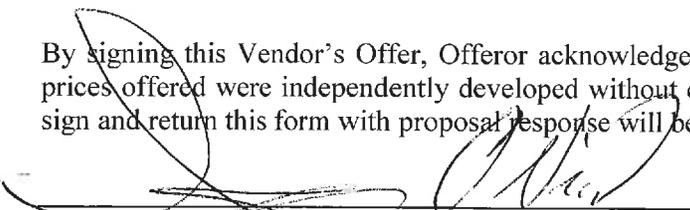
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Company Name:	<u>Red Eye Radiator and DPF Specialist LLC</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>2239 N Black Canyon Hwy</u>		
City, State, Zip:	<u>Phoenix, AZ 85009</u>		
Contact Person:	<u>Gary Oneil</u>	Phone Number:	<u>603-910-7144</u>
E-mail Address:	<u>gary@redeyeservices.com</u>	Cell Number:	<u>603-910-7144</u>
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u>Red Eye Radiator and DPF</u>		
Company Payment Remit To Address :			
Street Address:	<u>2239 N Black Canyon Hwy</u>		
City, State, Zip:	<u>Phoenix, AZ 85009</u>		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	_____		
<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"/>

3.
4. **SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK)**
5. **THIS PROPOSAL IS OFFERED BY**

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Signature of Authorized Offeror

3-31-16
Date

Vendor's Offer

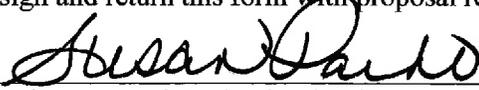
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Company Name:	Southwest Diesel & Electrical Corporation		
Company Purchase Order Mailing Address:			
Street Address:	1830 N. 27 th Ave		
City, State, Zip:	Phoenix, AZ. 85009-2614		
Contact Person:	Alan Timms	Phone Number:	602-269-2471
E-mail Address:	atimms@swdiesel.com	Cell Number:	602-377-4877
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Southwest Diesel & Electrical Corporation		
Company Payment Remit To Address :			
Street Address:	1830 N. 27 th Ave		
City, State, Zip:	Phoenix, Az. 85009-2614		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____			
<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 type="checkbox"/>	No <input checked="" type="checkbox"/>

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Signature of Authorized Offeror

4-15-2016

Date

Vendor's Offer

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Company Name:	COURTESY CHEVROLET ISUZU		
Company Purchase Order Mailing Address:			
Street Address:	1233 E CAMELBACK RD		
City, State, Zip:	PHOENIX AZ 85014		
Contact Person:	JACK T WALKER	Phone Number:	602-604-3075
E-mail Address:	jtwalker@courtesychev.com	Cell Number:	602-499-2094
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	COURTESY CHEVROLET ISUZU		
Company Payment Remit To Address :			
Street Address:	1233 E CAMELBACK RD		
City, State, Zip:	PHOENIX AZ 85014		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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 ClearingHouse) for payment?	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK)
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April 11th 2016

Signature of Authorized Offeror

Date

JACK T WALKER

SERVICE MANAGER

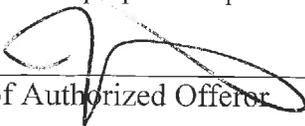
Vendor's Offer
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Company Name: <u>LZ Delta, LLC DBA: GOAZ Motorcycles</u>	
Company Purchase Order Mailing Address:	
Street Address: <u>15500 N Hayden Rd.</u>	
City, State, Zip: <u>Scottsdale, AZ 85260</u>	
Contact Person: <u>Jay Tucker</u>	Phone Number: <u>480-398-2545</u>
E-mail Address: <u>jtucker@goaz.com</u>	Cell Number: _____
<u>Remit To Information</u>	
Company Name (as it appears on invoice):	<u>GOAZ Motorcycles</u>
Company Payment Remit To Address :	
Street Address: <u>15500 N. Hayden Rd</u>	
City, State, Zip: <u>Scottsdale, AZ 85260</u>	
<u>Company Tax Information</u>	
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____	
<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 type="checkbox"/> No <input checked="" type="checkbox"/>

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Signature of Authorized Offeror

4/12/2016

Date

Vendor's Offer

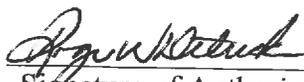
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Company Name:	<u>Lacal Equipment Inc</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>Po Box 757</u>		
City, State, Zip:	<u>Jackson Center, Ohio 45334</u>		
Contact Person:	<u>Jason Wright</u>	Phone Number:	<u>800-543-6161</u>
E-mail Address:	<u>jason@lacal.com</u>	Cell Number:	<u>NA</u>
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u>Lacal Equipment Inc</u>		
Company Payment Remit To Address :			
Street Address:	<u>Po Box 757</u>		
City, State, Zip:	<u>Jackson Center, Ohio 45334</u>		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	<u>03 0379675</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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Signature of Authorized Offeror

Date

4/8/2016

Roger Detrick

President

Vendor's Offer

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Company Name:	BALAR HOLDING CORP. dba BALAR EQUIPMENT		
Company Purchase Order Mailing Address:			
Street Address:	11023 N 22 ND AVE.		
City, State, Zip:	PHOENIX, AZ. 85029		
Contact Person:	PETER EVANS	Phone Number:	602-944-1933
E-mail Address:	PEVANS@BALAR.COM	Cell Number:	602-757-8764
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	BALAR EQUIPMENT		
Company Payment Remit To Address :			
Street Address:	11023 N 22 ND AVE.		
City, State, Zip:	PHOENIX, AZ. 85029		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	N/A		
<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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Signature of Authorized Offeror

4/12/16

Date

PETER EVANS

C.O.O.

Vendor's Offer

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Company Name:	O'Reilly Auto Enterprises LLC DBA O'Reilly Auto Parts		
Company Purchase Order Mailing Address:			
Street Address:	233 S. Patterson		
City, State, Zip:	Springfield, MO 65802		
Contact Person:	Vanessa Creech	Phone Number:	417-829-5879
E-mail Address:	probids@oreillyauto.com	Cell Number:	N/A
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	O'Reilly Auto Parts		
Company Payment Remit To Address :			
Street Address:	PO Box 9464		
City, State, Zip:	Springfield, MO 65801		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	30828, 58864, 59445		
<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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Signature of Authorized Offeror

4/12/16

Date

Vanessa Creech

Bid Analyst II

Vendor's Offer

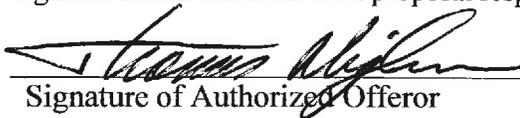
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Company Name:	WAYNE ENGINEERING, LLC. dba WAYNE OEM PARTS AND SERVICE		
Company Purchase Order Mailing Address:			
Street Address:	1801 W. WATKINS ST.		
City, State, Zip:	PHOENIX, AZ. 85007		
Contact Person:	TOM NIGBUR	Phone Number:	480-695-3503
E-mail Address:	tnigbur@wayneusa.com	Cell Number:	480-695-3503
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	WAYNE OEM PARTS AND SERVICE		
Company Payment Remit To Address :			
Street Address:	1801 W. WATKINS ST.		
City, State, Zip:	PHOENIX, AZ. 85007		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____			
<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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Signature of Authorized Offeror

4.11.16
Date

THOMAS NIGBUR
Print or Type Name of Authorized Individual
Form 201-B (RFP)

GM/SALES MANAGER
Title of Authorized Individual

Vendor's Offer

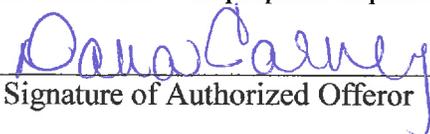
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Company Name:	Elliott Auto Supply Co Inc dba Factory Motor Parts		
Company Purchase Order Mailing Address:			
Street Address:	2350 W Broadway Rd		
City, State, Zip:	Mesa, AZ 85202		
Contact Person:	Gordon Litzau	Phone Number:	480-964-8727
E-mail Address:	g.litzau@fmpco.com	Cell Number:	602-451-8728
Remit To Information			
Company Name (as it appears on invoice):	Factory Motor Parts		
Company Payment Remit To Address :			
Street Address:	2350 W Broadway Road		
City, State, Zip:	Mesa, AZ 85202		
Company Tax Information			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	NA		
Payment Options			
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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Signature of Authorized Offeror

3/29/2016
Date

Vendor's Offer

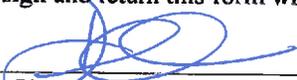
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Company Name: <u>Earnhardt Ford Sales Co. DBA Earnhardt Ford</u>	
Company Purchase Order Mailing Address:	
Street Address: <u>7300 W. Orchid Lane</u>	
City, State, Zip: <u>Chandler, AZ 85226</u>	
Contact Person: <u>Larry Baragar</u>	Phone Number: <u>480-763-6227</u>
E-mail Address: <u>larry.baragar@earnhardt.com</u>	Cell Number: <u>602-810-0314</u>
<u>Remit To Information</u>	
Company Name (as it appears on invoice): <u>Earnhardt Ford</u>	
Company Payment Remit To Address :	
Street Address: <u>PO Box 15012</u>	
City, State, Zip: <u>Tempe Az. 85284</u>	
<u>Company Tax Information</u>	
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: <u>07-033476H</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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Signature of Authorized Offeror

4-13-16

Date

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Company Name:	Serck Radiator		
Company Purchase Order Mailing Address:			
Street Address:	424 E. Baseline Rd		
City, State, Zip:	Mesa Az. 85204		
Contact Person:	Beto Hernandez	Phone Number:	480 926-3555
E-mail Address:	bhernandez@serckservices.com	Cell Number:	520 631-0790
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Serck Services Inc.		
Company Payment Remit To Address :			
Street Address:	5501 Pearl St		
City, State, Zip:	Denver Co. 80216		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	84-10747777		
<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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Beto Hernandez
Signature of Authorized Offeror

4/8/16
Date

BETO HERNANDEZ

HEAVY DUTY SALES MANAGER

Vendor's Offer

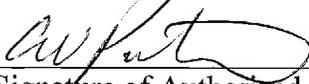
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Company Name:	H & E Equipment Services, Inc.		
Company Purchase Order Mailing Address:			
Street Address:	4010 South 22 nd Street		
City, State, Zip:	Phoenix, AZ, 85040		
Contact Person:	Eric Pritchard	Phone Number:	602.232.0060
E-mail Address:	epritchard@he-equipment.com	Cell Number:	480.266.9905
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	H & E Equipment Services, Inc.		
Company Payment Remit To Address :			
Street Address:	4010 South 22 nd Street		
City, State, Zip:	Phoenix, AZ, 85040		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	81-0553291		
<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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Signature of Authorized Offeror

4.26.16
Date

Vendor's Offer

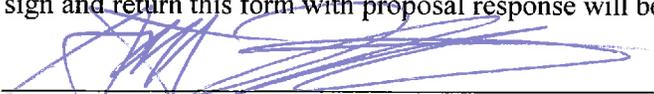
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Company Name:	<u>Arizona Rubber Company</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>2939 N. 31st Avenue</u>		
City, State, Zip:	<u>Phoenix, AZ 85017</u>		
Contact Person:	<u>Scott Kertson</u>	Phone Number:	<u>(602) 272-7925</u>
E-mail Address:	<u>scott@azrubber.com</u>	Cell Number:	
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u><same></u>		
Company Payment Remit To Address :			
Street Address:	<u><same></u>		
City, State, Zip:			
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

 _____ Signature of Authorized Offeror	<u>4/26/16</u> _____ Date
<u>Scott Kertson</u> _____ Print or Type Name of Authorized Individual Form 201-B (RFP)	<u>President</u> _____ Title of Authorized Individual

Vendor's Offer

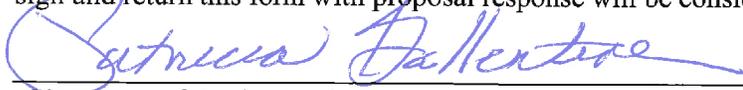
"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

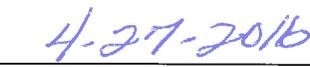
Company Name:	Arizona Refuse Sales, LLC		
Company Purchase Order Mailing Address:			
Street Address:	1930 W Broadway Road		
City, State, Zip:	Phoenix, AZ 85041		
Contact Person:	Daniel Mayne	Phone Number:	602-276-4390
E-mail Address:	dmayne@AZRefuse.com	Cell Number:	
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Arizona Refuse Sales, LLC		
Company Payment Remit To Address :			
Street Address:	1930 W Broadway Road		
City, State, Zip:	Phoenix AZ 85041		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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 type="checkbox"/>	No <input checked="" type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror



Date





Vendor's Offer

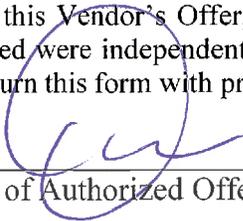
"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name: <u>AMERICAN EQUIPMENT SERVICE LLC</u>	
Company Purchase Order Mailing Address:	
Street Address: <u>898 W ILLINI ST</u>	
City, State, Zip: <u>PHOENIX, AZ 85041</u>	
Contact Person: <u>Juan Gonzalez</u>	Phone Number: <u>(602) 438-7402</u>
E-mail Address: <u>juan@americanequips.com</u>	Cell Number: <u>(602) 725-2996</u>
<u>Remit To Information</u>	
Company Name (as it appears on invoice): <u>AMERICAN EQUIPMENT SERVICE LLC</u>	
Company Payment Remit To Address :	
Street Address: <u>898 W ILLINI ST</u>	
City, State, Zip: <u>PHOENIX, AZ 85041</u>	
<u>Company Tax Information</u>	
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	<u>20516645</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 type="checkbox"/> No <input checked="" type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.


Signature of Authorized Offeror

4-14-16
Date

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	<u>BERGE FORD</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>460 EAST AUTO CENTER DRIVE</u>		
City, State, Zip:	<u>MESA, AZ 85204</u>		
Contact Person:	<u>BUTCH LEMEN</u>	Phone Number:	<u>480-497-7650</u>
E-mail Address:	<u>BLEMEN@BERGEFORD.COM</u>	Cell Number:	<u>602-501-9964</u>
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u>BERGE FORD</u>		
Company Payment Remit To Address :			
Street Address:	<u>460 EAST AUTO CENTER DRIVE</u>		
City, State, Zip:	<u>MESA, AZ 85204</u>		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	_____		
<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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.



Signature of Authorized Offeror

04/07/2016

Date

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	Colby Welding & Radiator Inc.		
Company Purchase Order Mailing Address:			
Street Address:	1831 West Linden Street		
City, State, Zip:	Phoenix, AZ 85007		
Contact Person:	Dianna Delgadillo	Phone Number:	602.258.7147
E-mail Address:	colbywelding@qwestoffice.net	Cell Number:	602.502.8470
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Colby Welding & Radiator Inc.		
Company Payment Remit To Address :			
Street Address:	1831 West Linden Street		
City, State, Zip:	Phoenix, AZ 85007		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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 type="checkbox"/>	No <input checked="" type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

 Signature of Authorized Offeror	4-12-16 Date
Edwin Colby	Owner

Michael Greene
Michael Greene, C.P.M., CPPO
Procurement Administrator

Vendor's Offer
"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name: <u>Perez Auto LLC</u>	
Company Purchase Order Mailing Address:	
Street Address: <u>429 S. 35th ave</u>	
City, State, Zip: <u>Phoenix AZ 85009</u>	
Contact Person: <u>Ismael Perez</u>	Phone Number: <u>480 479 4432</u>
E-mail Address: <u>Perezbodyshop@yahoo.com</u>	Cell Number: _____
<u>Remit To Information</u>	
Company Name (as it appears on invoice): <u>Downtown Auto Shop</u>	
Company Payment Remit To Address :	
Street Address: <u>429 S. 35th ave</u>	
City, State, Zip: <u>Phoenix AZ 85009</u>	
<u>Company Tax Information</u>	
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: <u>20778260</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"/>

- 3.
- 4. **SIGNATURE OF AUTHORIZED OFFEROR REQUIRED** (MUST SIGN IN INK)
- 5. **THIS PROPOSAL IS OFFERED BY**

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

[Signature] _____ 4/21/16 _____
Signature of Authorized Offeror Date

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	RDO Equipment Co.		
Company Purchase Order Mailing Address:			
Street Address:	2649 N. 29 th Ave.		
City, State, Zip:	Phoenix, AZ 85009		
Contact Person:	Jim Kleppe	Phone Number:	602-415-4700
E-mail Address:	jkleppe@rdoequipment.com	Cell Number:	602-721-6643
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	RDO Equipment Co.		
Company Payment Remit To Address :			
Street Address:	P.O. Box 7160		
City, State, Zip:	Fargo, N.D. 58106		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

 Signature of Authorized Offeror	4-8-16 Date
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Vendor's Offer

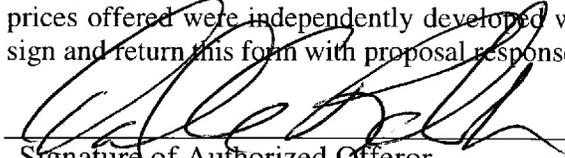
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Company Name:	Quality Vans and Specialty Vehicles		
Company Purchase Order Mailing Address:			
Street Address:	1865 S Indian Bend Rd		
City, State, Zip:	Tempe Az 85281		
Contact Person:	Dave Rabuck	Phone Number:	480-464-7007
E-mail Address:	dave@qualityvans.com	Cell Number:	602-703-2929
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Same as above		
Company Payment Remit To Address :			
Street Address:			
City, State, Zip:			
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	20888639		
<u>Payment Options</u>			
Will your company accept the City's Master Card for payment?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Will your company accept Payment via ACH (Automated Clearing House) for payment?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

4/15/16
Date

Vendor's Offer

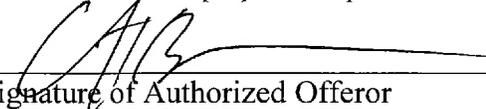
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Company Name:	Bingham Equipment Co. dba Bobcat of Phoenix		
Company Purchase Order Mailing Address:			
Street Address:	1655 S. Country Club Dr.		
City, State, Zip:	Mesa, AZ 85210		
Contact Person:	Erik Kobus	Phone Number:	480-969-5516
E-mail Address:	erik.kobus@binghamequipment.com	Cell Number:	480-363-4913
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Bingham Equipment Co.		
Company Payment Remit To Address :			
Street Address:	1655 S. Country Club Dr.		
City, State, Zip:	Mesa, AZ 85210		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	N/A		
<u>Payment Options</u>			
Will your company accept the City's Master Card for payment?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	X
Will your company accept Payment via ACH (Automated Clearing House) for payment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	X

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

4/11/2016
Date

Erik B. Kobus

Assistant Controller

Print or Type Name of Authorized Individual

Title of Authorized Individual

Vendor's Offer

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Company Name:	Bridgestone Americas Tire Operations, LLC d/b/a GCR Tires & Service		
Company Purchase Order Mailing Address:			
Street Address:	2601 N. 32 nd Ave		
City, State, Zip:	Phoenix, AZ 85009		
Contact Person:	Steve Fruchey	Phone Number:	602-269-1351
E-mail Address:	fruchesteve@bfusa.com	Cell Number:	520-484-9279
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	GCR TIRES SERVICE		
Company Payment Remit To Address :			
Street Address:	2601 N. 32 nd Ave		
City, State, Zip:	Phoenix, Az 85009		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
<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 type="checkbox"/>	No <input type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

Date 4/8/16

Vendor's Offer

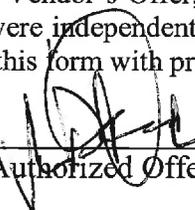
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Company Name:	<u>Empire Southwest, LLC</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>1725 S Country Club Drive</u>		
City, State, Zip:	<u>Mesa, AZ 85210</u>		
Contact Person:	<u>Mark Vander Giessen</u>	Phone Number:	<u>623-707-1730</u>
E-mail Address:	<u>Mark.vandergiesen@empire-cat.com</u>	Cell Number:	<u>602-639-0582</u>
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u>Empire Southwest, LLC</u>		
Company Payment Remit To Address :			
Street Address:	<u>1725 S Country Club Drive</u>		
City, State, Zip:	<u>Mesa, AZ 85210</u>		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	<u>200563</u>		
<u>Payment Options</u>			
Will your company accept the City's Master Card for payment?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Will your company accept Payment via ACH (Automated Clearing House) for payment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

<u></u>	<u>4-26-2017</u>
Signature of Authorized Offeror	Date
<u>John Helms</u>	<u>Vice President/Chief Financial Officer</u>
Print or Type Name of Authorized Individual	Title of Authorized Individual

Form 201-B (RFP)

Vendor's Offer

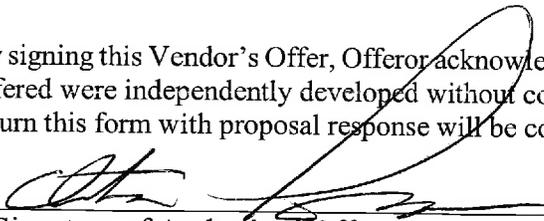
"Return this Section with your Response"

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Company Name:	USD Inc.		
Company Purchase Order Mailing Address:			
Street Address:	1580 E Riverview Dr.		
City, State, Zip:	Phoenix, AZ 85034		
Contact Person:	Christian Fornear	Phone Number:	847-212-8835
E-mail Address:	CFornear@USDParts.com	Cell Number:	847-212-8835
Remit To Information			
Company Name (as it appears on invoice):	USD Inc.		
Company Payment Remit To Address :			
Street Address:	P.O. Box 20805		
City, State, Zip:	Phoenix, AZ 85036		
Company Tax Information			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	N/A		
Payment Options			
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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) **THIS PROPOSAL IS OFFERED BY**

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

 Signature of Authorized Offeror	04/22/2016 Date
Christian Fornear Print or Type Name of Authorized Individual Form 201-B (RFP)	Regional Fleet Specialist Title of Authorized Individual

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name: REDBURN TIRE COMPANY

Company Purchase Order Mailing Address:

Street Address: 3801 W. CLARENDON

City, State, Zip: PHOENIX, AZ 85019

Contact Person: GARY SMITH Phone Number: 602-272-7601

E-mail Address: gsmith@rtco.net Cell Number: 480-528-6880

Remit To Information

Company Name (as it appears on invoice): REDBURN TIRE COMPANY

Company Payment Remit To Address :

Street Address: P.O. BOX 14828

City, State, Zip: PHOENIX, AZ 85063

Company Tax Information

If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____

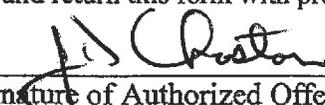
Payment Options

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

**SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK)
THIS PROPOSAL IS OFFERED BY**

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

 April 12, 2016
 Signature of Authorized Offeror Date

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name: Bridgestone Hosepower

Company Purchase Order Mailing Address:

Street Address: 3327 N. 29th Avenue

City, State, Zip: Phoenix AZ 85017

Contact Person: Jerry Sawyer Phone Number: 602-253-3123

E-mail Address: JSawyer@hosepower.com Cell Number: 602-708-0402

Remit To Information

Company Name (as it appears on invoice): BRIDGESTONE HOSEPOWER LLC

Company Payment Remit To Address :

Street Address: PO BOX 861777

City, State, Zip: ORLANDO FL 32886-1777

Company Tax Information

If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____

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

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.

Jerry Sawyer
Signature of Authorized Offeror

04/25/2016

Date



4-25-16

Vendor's Offer

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Company Name: JACOBSEN

Company Purchase Order Mailing Address:

Street Address: 1715 S. HOLBROOK, SUITE 101

City, State, Zip: Tempe, ARIZONA 85281

Contact Person: KEN COGGIN Phone Number: 480-967-1211

E-mail Address: kcoggin@textron.com Cell Number: 602-757-4268

Remit To Information

Company Name (as it appears on invoice): JACOBSEN

Company Payment Remit To Address :

Street Address: PO BOX 101282

City, State, Zip: PASADENA, CA 91189-1282

Company Tax Information

If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____

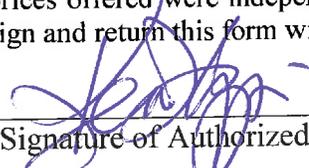
Payment Options

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

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror
Ken COGGIN

4/23/2016

Date
TERRITORY SALES REP.

Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	Rush Truck Centers of Arizona, d/b/a Rush Truck Center, Phoenix		
Company Purchase Order Mailing Address:			
Street Address:	9600 W Roosevelt St		
City, State, Zip:	Tolleson Arizona 85353		
Contact Person:	Chris Ryan	Phone Number:	602-422-8110
E-mail Address:	Ryanc@rushenterprises.com	Cell Number:	520-837-9305
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	Rush Truck Center, Phoenix		
Company Payment Remit To Address : Rush Administrative services Rush Enterprises Inc.			
Street Address:	PO Box 34630		
City, State, Zip:	San Antonio Texas 78265-4630		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	N/A Az Tax priv license 07-599669-K		
<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 type="checkbox"/>	No <input checked="" type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) **THIS PROPOSAL IS OFFERED BY**

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Signature of Authorized Offeror

Date

4/19/10

Vendor's Offer

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Company Name: The Lighthouse, Inc

Company Purchase Order Mailing Address:

Street Address: 1502 N. 29th Ave

City, State, Zip: Phoenix Az 85009

Contact Person: Melanie Serpa Phone Number: 602-272-8077

E-mail Address: Melanie@thelighthouseinc.com Cell Number: 602-725-9564

Remit To Information

Company Name (as it appears on invoice): The Lighthouse, Inc

Company Payment Remit To Address :

Street Address: 425 West 10th Street

City, State, Zip: SAN PEDRO Ca 90731

Company Tax Information

If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: PHX 76083302

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

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Melanie Serpa 4-25-16

Signature of Authorized Offeror Date

Michael Greene, C.P.M., CPPO
Procurement Administrator

Vendor's Offer

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Company Name:	McNeilus Financial dba McNeilus Truck & Manufacturing		
Company Purchase Order Mailing Address:			
Street Address:	4724 W. Roosevelt Street		
City, State, Zip:	Phoenix, AZ 85043		
Contact Person:	Mark Fernandez	Phone Number:	602-721-4765
E-mail Address:	mfernandez@mcneilusco.com	Cell Number:	602-721-4765
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	McNeilus Financial dba McNeilus Truck & Manufacturing		
Company Payment Remit To Address :			
Street Address:	4724 W. Roosevelt Street		
City, State, Zip:	Phoenix AZ 85043		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	N/A		
<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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Vendor's Offer

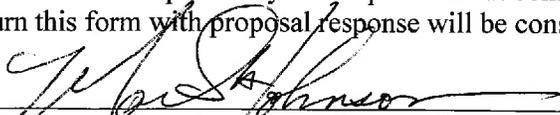
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Company Name:	<u>Arizona Brake & Clutch Supply, Inc.</u>		
Company Purchase Order Mailing Address:			
Street Address:	<u>2211 N. Black Canyon Hwy.</u>		
City, State, Zip:	<u>Phoenix, Arizona 85009</u>		
Contact Person:	<u>Mark A. Johnson</u>	Phone Number:	<u>602-256-7966</u>
E-mail Address:	<u>mjohnson@arizonabrake.com</u>	Cell Number:	<u>602-826-2221</u>
<u>Remit To Information</u>			
Company Name (as it appears on invoice):	<u>Arizona Brake & Clutch Supply, Inc.</u>		
Company Payment Remit To Address :			
Street Address:	<u>2211 N Black Canyon Hwy.</u>		
City, State, Zip:	<u>Phoenix, Arizona 85009</u>		
<u>Company Tax Information</u>			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:	_____		
<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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

Mark A. Johnson

Print or Type Name of Authorized Individual

Form 201-B (RFP)

April 13, 2016

Date

President

Title of Authorized Individual

Vendor's Offer

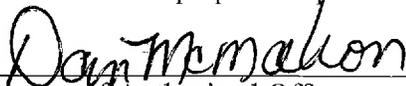
“Return this Section with your Response”

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Company Name:	Freightliner of Arizona		
Company Purchase Order Mailing Address:			
Street Address:	1230 S. Akimel Ln.		
City, State, Zip:	Chandler, Az. 85226		
Contact Person:	Dan McMahon	Phone Number:	480-282-4000
E-mail Address:	dmcMahon@fswaz.com	Cell Number:	
Remit To Information			
Company Name (as it appears on invoice):	Freightliner of Arizona		
Company Payment Remit To Address :			
Street Address:	9899 W. Roosevelt St.		
City, State, Zip:	Tolleson, Az. 85353		
Company Tax Information			
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.:			
Payment Options			
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"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK) THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror

4-12-16
Date

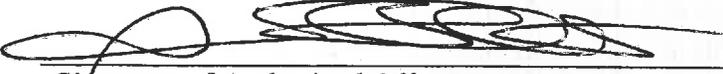
Vendor's Offer
"Return this Section with your Response"

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Company Name: <u>Midway Chevrolet</u>	
Company Purchase Order Mailing Address:	
Street Address: <u>2323 West Bell Road</u>	
City, State, Zip: <u>Phoenix, AZ, 85023</u>	
Contact Person: <u>Michael Lewis</u>	Phone Number: <u>602-672-1484</u>
E-mail Address: <u>MLewis@VTAIG.com</u>	Cell Number: <u>602-672-1484</u>
<u>Remit To Information</u>	
Company Name (as it appears on invoice): <u>Midway Chevrolet</u>	
Company Payment Remit To Address :	
Street Address: <u>2323 West Bell Rd.</u>	
City, State, Zip: <u>Phoenix, AZ 85023</u>	
<u>Company Tax Information</u>	
If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: _____	
<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 type="checkbox"/> No <input checked="" type="checkbox"/>

SIGNATURE OF AUTHORIZED OFFEROR REQUIRED (MUST SIGN IN INK)
THIS PROPOSAL IS OFFERED BY

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Signature of Authorized Offeror _____ Date 4/23/2016

Mr. J. H. Bhatt - Midway Chevrolet Co. Controller
Print or Type Name of Authorized Individual _____ Title of Authorized Individual