AS COUNTY BID TABULATION	t		VEP	DOR #1	VEN	DOR #1A	VEN	DOR #1B	
D NO. 2013-002-6150			Pasco Brokerage,		Pasco Brokerage,	Inc.	Pasco Brokerage, Inc.		
FRACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL HT TYPE RACKLESS CONVEYOR DISHWASHER			6465 Chase Oaks	Blvd.					
ER: SAM COOPER			Plano, Texas 750						
JING DATE: October 15, 2012 FRACT PERIOD:			Tel: 972-596-335 Fax: 972-596-28	, 17					
RCA CERTIFIED M/WBE VENDOR			No		No		No		
FORM SUBMITTED? .AS COUNTY TAXPAYER			Yes No		Yes No		Yes No		
WERE YOU NOTIFIED?			Dallas County Wel	osite	Dallas County We	bsite	Dallas County We	bsite	
DESCRIPTION	ESTIMATED	U/I	UNIT	EXTENSION	UNIT	EXTENSION	UNIT	EXTENSION	
	QUANTITY		PRICE		PRICE		PRICE		
Purchase and Installation of a Commercial Flight Type Rackless Conveyor Dishwasher									
1	1	each							
a) Equipment Cost b) Labor and Installation Cost			\$150,495.00 \$22,555.00	\$150,495.00 \$22,555.00	\$150,495.00 \$35.000.00	\$150,495.00 \$35.000.00	\$163,845.00 \$22,555.00	\$163,845 \$22,555	
 c) All other cost associated with this bid including overhead 			\$3,105.00	\$3,105.00	\$3,105.00	\$3,105.00	\$3,105.00	\$3,105	
Total Bid Cost (a+b+c) Trade in allowance for the existing Stero dishwasher			176,155.00 No Allowance	176,155.00 No Allowance	\$188,600.00 No Allowance	\$188,600.00 No Allowance	\$189,505.00 No Allowance	\$189,50 No Allowa	
Trade in anowance for the existing Stero disnwasher									
Grand Total (a+b+c-d)			\$176,155.00	\$176,155.00	\$188,600.00	\$188,600.00	\$189,505.00	\$189,505	
Specify the Brand, Make and Manufacturer Model Number of the proposed Flight Type	5								
Rackless Conveyor Dishwasher unit			Hobart Model No	. FT900+ BUILDUP	Hobart Model No	b. FT900+ BUILDUP	Meiko Model No	B-US 282 LPW	
			Commercial Tec	n Service,			Commercial Tec	h Service.	
Specify Name of Installation Company			Richardson, Tex	as	Hobart Service, I	rving, Texas	Richardson, Texas		
Specify Manufacturer Standard Warranty Coverage Period for proposed Flight Type									
Conveyor Dishwasher unit:									
All Parts: Labor and Travel Time:			1 Year 1 Year		1 Year 1 Year		1 Year 1 Year		
Specify the name, address and telephone number of the manufacturer authorized local factory representative and service center who will perform the on-site warranty service									
coverage under this contract:									
Company Name: Address:			Hobart Service 8120 Jetstar		Hobart Service 8120 Jetstar		Cooking Equipm 3040 East Mead		
City/State/Zip:			Irving, TX 75063		Irving, TX 75063		Irving, TX 75150		
Telephone Number:			972-915-3822		972-915-3822		972-686-6666		
Specify the name, address and telephone number of the manufacturer authorized local									
factory representative and service center who will perform the on-site warranty service									
coverage under this contract: Company Name:									
Address:									
City/State/Zip: Telephone Number:									
Specify the name, address and telephone number of the manufacturer authorized local factory representative and service center who will perform the on-site warranty service									
coverage under this contract:									
Company Name: Address:			Hager Restaurar 433 Regal Row	it Service					
City/State/Zip:			Dallas, TX 75247	,					
Telephone Number:			214-574-5200						
Specify the name, address and telephone number of three (3) authorized factory									
distributors for replacement parts for the proposed flight type rackless conveyor dishwasher unit:									
unit weater unit.			Hobart Service -I	rving, Tx.	Hobart Service -I	rving, Tx.	Hobart Service -	rving, Tx.	
			Cooking Equipm	ent Specialists -	Cooking Equipm	ent Specialists -	Cooking Equipm	ent Specialists -	
			Irving, TX. Hagar Restaurar	t Services, Dallas,	Irving, TX. Hagar Restaurar	nt Services, Dallas,	Irving, TX. Hagar Restaurar	nt Services. Dalla	
			Tx.	,,	Tx.	, = ====,	Tx.		
Specify the minimum discount off of manufacturer's list price for replacement and	I								
preventive maintenance parts that will be offered to Dallas County by the authorized									
distributors indicated above:			10%		10%		10%		
				ned details regarding		hed details regarding	Please see attac		
			specifications on physical size of the	various brands and ne units, due to	specifications on physical size of the	various brands and he units, due to	specifications on physical size of t	various brands a he units, due to	
Specify any additional comments/cost/etc. included with your bid proposal, if applicable:			clearance restrict		clearance restric		clearance restric		
Specify Prompt Payment Discount Terms:%days. Payment terms with									
no discount are Net 30 days upon receipt of proper invoice in the Dallas County Auditor's office.	1		0%		0%		0%		
			570		570		570		
Please answer the questions listed below:									
Specify the name, telephone number and e-mail address (if any) of the designated	l								
account representative who will be managing daily activities of this account:			Amy Leasure 97	2 506 2250	Amy Leasure 97	2 506 2250	Amy Leasure 97	2 506 2250	
			Amy Leasure 97. aleasure@pasco		Amy Leasure 97 aleasure@pasco		Amy Leasure 97 aleasure@pasco		
Specify the technical support telephone number and hours of operation:									
Technical Support Telephone Number:			Hobart - 972-915 CES - 972-686-6		Hobart - 972-915 CES - 972-686-6		Hobart - 972-915 CES - 972-686-6		
			Hagar - 214-574		Hagar - 214-574		Hagar - 214-574		
	1	1							
Hours of Operation:			M-F 8-5 With Aft	er Hours On Call	M-F 8-5 With Aft			er Hours On Call	

LLAS COUNTY BID TABULATION			VE	NDOR #1	VEN	DOR #1A	VE	NDOR #1B
D NO. 2013-002-6150			Pasco Brokerage	, Inc.	Pasco Brokerage	, Inc.	Pasco Brokerag	e, Inc.
NTRACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL IGHT TYPE RACKLESS CONVEYOR DISHWASHER			6465 Chase Oaks	Blvd.				
YER: SAM COOPER			Plano, Texas 750	23				
'ENING DATE: October 15, 2012 DNTRACT PERIOD:			Tel: 972-596-335 Fax: 972-596-28					
TRCA CERTIFIED M/WBE VENDOR			No		No		No	
01 FORM SUBMITTED? LLAS COUNTY TAXPAYER			Yes No		Yes No		Yes	
DW WERE YOU NOTIFIED?			Dallas County We	bsite	Dallas County We	bsite	Dallas County W	ebsite
DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION
Did your company check Dallas County website for any addendum(s) updates, and/or changes to the bid solicitation? Yes No			Yes		Yes		Yes	
Is the customer reference information included with your bid proposal: Yes No			Yes		Yes		Yes	
Specify the name, telephone number, and e-mail address of the account representative who will be handling this account: Contact Name:			Amy Leasure		Amy Leasure		Amy Leasure	
Telephone No			972-596-3350		972-596-3350		972-596-3350	
E-Mail Address:			aleasure@pasco	<u>pinc.net</u>	aleasure@pasci	<u>pinc.net</u>	aleasure@pasc	oinc.net
Specify the Alternative (Back-Up) Contact Person: Contact Name:			Kasey Hollon		Kasey Hollon		Kasey Hollon	
Telephone No			972-596-3350		972-596-3350		972-596-3350	
E-Mail Address:			khollon@pascoi	nc.net	khollon@pascoi	nc.net	khollon@pasco	inc.net
Should your firm be awarded this contract, describe what (if any) portion of the bid requirements will be subcontracted out:			If awarded this c Brokerage will su installation portion	ubcontract only the	If awarded this of Brokerage will si installation portio	ubcontract only the		contract, Pasco ubcontract only the on.
Cooperative Purchasing: Should other Governmental Entities decide to participate in this contract, would you, the awarded Contractor agrees that all terms, conditions, specifications, and pricing would apply to that entity? Yes NO								
Note: All parchases by Governmental Entities other than Dallas County will be billed directly to that Governmental Entity and paid by that Governmental Entity. Dallas County will not be responsible for other Governmental Entity's debt.								
Does your firm/company have the required insurance coverage stated under SECTION 3 – <u>INSURANCE</u> <u>REOUREMENTS</u> and agree to comply with these requirements during the duration of this contract? Yes NO								
If No, will your firm be able to acquire the required coverage within ten (10) days upon notification of contract award? Yes NO								
Information on Provision of Health Insurance Coverage for Employees								
a) Does your company provide health insurance coverage to its employees? Yes No			Yes		Yes		Yes	
b) If your company does provide health insurance coverage to its employees, does the company share in the cost a minimum of: 90% for employee only coverage? Yes No			Yes		Yes		Yes	
65% for family coverage? Yes No c) If your company does provide health insurance coverage to its employees, does the			No		No		No	
company share in the cost a minimum of 75% for employee only coverage and 50% for family coverage? d) If your company provides health insurance coverage to its employees, is the coverage			Yes		Yes		Yes	
comparable to the services provided by Dallas County as described in the attached summary plan description? (See Attachment A) Yes No			Yes		Yes		Yes	
e) If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the subcontractors provide health insurance coverage and share in the cost? Yes No			Yes		Yes		Yes	
In the event Dallas County elects to give a preference to a bidder who provides comparable health insurance, that bidder and any subcontractors will be required to provide additional documentation of the declared health insurance coverage.								
For statistical purposes:								
Please indicate to Dallas County whether the principal company owner is a: (Please check one)								
[] Dallas County Tax Payer								
[] Other County Tax Payer			X -Co	Ilin County	X -Co	ollin County	Х-С	ollin County

DALLA	S COUNTY BID TABULATION			VE	NDOR #1	VEN	DOR #1A	VENDOR #1B		
BID NO. 2013-002-6150				Pasco Brokerage		Pasco Brokerage, Inc.		Pasco Brokerage, Inc.		
	ACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL			6465 Chase Oaks Blvd.						
	FLIGHT TYPE RACKLESS CONVEYOR DISHWASHER									
	: SAM COOPER			Plano, Texas 75023						
	NG DATE: October 15, 2012			Tel: 972-596-335						
	RACT PERIOD:			Fax: 972-596-28	317					
	A CERTIFIED M/WBE VENDOR ORM SUBMITTED?			No Yes		No Yes		No Yes		
	S COUNTY TAXPAYER			No		No		No		
	VERE YOU NOTIFIED?			Dallas County We	heita	Dallas County We	heita	Dallas County We	heita	
				Dunus county ite	0.site	Duras County We	0.me	Danas County websile		
	DESCRIPTION	ESTIMATED	U/I	UNIT	EXTENSION	UNIT	EXTENSION	UNIT	EXTENSION	
		OUANTITY		PRICE		PRICE		PRICE		
	Please indicate whether your company is certified through an agency "other than" North									
	Central Texas Regional Certification Agency (NCTRCA)? (Example: Statewide									
	Historically Underutilized Business (HUB) Program, MBE, WBE, DBE, SBA, SBA,									
	Veteran, 8(a)									
						Yes		N		
	Yes No			Yes		res		Yes		
	If yes, please provide the agency name and the applicable certification number below:									
	it yes, please provide the agency name and the appleable certification number below.									
	Certifying Agency Name:			HUB		HUB		HUB		
	Registration or Certification Number:			1751760725900		1751760725900		1751760725900		
	Expiration Date:			22-Feb-2014		22-Feb-2014		22-Feb-2014		
	Please indicate the manner in which you were notified of this solicitation:									
	[] Daily Commercial Record									
] Dallas County Website				х		х		x	
	[] Datas County website				^		~		^	
	[] Letter from Dallas County Purchasing Department									
	[] Other: specify:									
1										
	Thank you.									

DALLAS COUNTY BID TABULATION			VENDOR #1C		VEN	DOR #1D	VEN	DOR #1E	VENDOR #2		
BID NO. 2013-002-6150			Pasco Brokerage	, Inc.	Pasco Brokerage, Inc.		Pasco Brokerage, Inc.		Sam Tel & Son Inc.		
CONTRACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL FLIGHT TYPE RACKLESS CONVEYOR DISHWASHER BUYER: SAM COOPER OPENING DATE: October 15, 2012 CONTRACT PERIOD: NCTRAC CENTFIED MWBE VENDOR					No		No		300 Smith Street Farmingdale, NY Tel: 631-501-970 Fax: 631-501-97	11735 0	
NCIKCA CERTIFIED MIWBE VENDOR EE01 FORM SUBMITTED? DALLAS COUNTY TAXPAYER HOW WERE YOU NOTIFIED?		No Yes No Dallas County Website		Yes No Dallas County Website		Yes No Dallas County Website		Yes No BidNet			
DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION	
Purchase and Installation of a Commercial Flight Type Rackless Conveyor Dishwasher 1 a) Equipment Cost b) Labor and Installation Cost c) All other cost associated with this bid including overhead	1	each	\$135,140.00 \$25,000.00 \$3,105.00	\$25,000.00	\$122,425.00 \$25,000.00 \$3,105.00	\$25,000.00	\$103,000.00 \$21,580.00 \$3,105.00	\$103,000.00 \$21,580.00 \$3,105.00	\$147,727.94 \$30,020.00 None	\$147,727.94 \$30,020.00 None	
Total Bid Cost (arbect) Total Bid Cost (arbec) Trade in allowance for the existing Stero dishwasher			\$163,245.00 No Allowance	\$163,245.00	\$150,530.00 No Allowance	\$150,530.00	\$127,685.00 No Allowance	\$127,685.00 No Allowance	\$177,747.84 No Allowance		
Grand Total (a+b+c-d)			\$163,245.00	\$163,245.00	\$150,530.00	\$150,530.00	\$127,685.00	\$127,685.00	\$177,747.94	\$177,747.94	
Specify the Brand, Make and Manufacturer Model Number of the proposed Flight Type Rackless Conveyor Dishwasher unit			InSinger Model I	No. RC MASTER	Champion Mode	el No. EUCCW8	Stero Model No.	STPCW-33D	•		
Specify Name of Installation Company			Commercial Tec Richardson, Tex		Commercial Tec Richardson, Tex		Commercial Tec Richardson, Tex		Hobart Service,	Irving, Texas	
Specify Manufacturer Standard Warranty Coverage Period for proposed Flight Type Conveyor Dishwasher unit: All Parts: Labor and Travel Time:			1 Year 1 Year		1 Year 1 Year		1 Year 1 Year		16 month/Hobai As Above	t installation	
Specify the name, address and telephone number of the manufacturer authorized local factory representative and service center who will perform the on-site warranty service coverage under this contract: Company Name: Address; City/State/Zip; Telephone Number:			Hagar Restaurai 433 Regal Row Dallas, TX 7524		Hagar Restaurar 433 Regal Row Dallas, TX 7524		Hagar Restaurar 433 Regal Row Dallas, TX 7524		Hobart Service 8120 Jetstar Drive, Suite 100 Irving, TX 75063 972-929-0052		
Specify the name, address and telephone number of the manufacturer authorized local factory representative and service center who will perform the on-site warranty service coverage under this contract: Company Name:Address:Address:City/StateZipcTelephone Number:											
Specify the name, address and telephone number of the manufacturer authorized local factory presentative and service center who will perform the on-site warranty service coverage under this contract: Company Name:											
Specify the name, address and telephone number of three (3) authorized factory distributors for replacement parts for the proposed flight type rackless conveyor dishwasher unit:											
			Hobart Service - Cooking Equiprr Irving, TX. Hagar Restauran Tx.	-	Cooking Equipment Specialists - Cool Irving, TX.		Hobart Service -Irving, Tx. Cooking Equipment Specialists - Irving, TX. Hagar Restaurant Services, Dallas, Tx.		Hobart Service - Hobart Service - Hobert Service-	-	
Specify the minimum discount off of manufacturer's list price for replacement and preventive maintenance parts that will be offered to Dallas County by the authorized distributors indicated above:			10%		10%		10%				
Specify any additional comments/cost/etc. included with your bid proposal, if applicable:					Please see attached details regarding specifications on various brands and physical size of the units, due to clearance restrictions.		Please see attached details regarding specifications on various brands and physical size of the units, due to clearance restrictions.				
Specify Prompt Payment Discount Terms:%days. Payment terms with no discount are Net 30 days upon receipt of proper invoice in the Dallas County Auditor's office.			0%	0%		0%					
Please answer the questions listed below:											
Specify the name, telephone number and e-mail address (if any) of the designated account representative who will be managing daily activities of this account:			Amy Leasure 97		Amy Leasure 97		Amy Leasure 97 aleasure@pasco			I-501-9700x112	
Specify the technical support telephone number and hours of operation: Technical Support Telephone Number:			aleasure@pascoinc.net Hobart - 972-915-3822 CES - 972-686-6666		aleasure@pascoinc.net Hobart - 972-915-3822 CES - 972-686-6666 Haqar - 214-574-5200		Hobart - 972-91 CES - 972-686-6 Hagar - 214-574	5-3822 6666	fsmilow@samtell.com 800-333-7447		
Hours of Operation:			Hagar - 214-574 M-F 8-5 With Af	ter Hours On Call	Ť	ter Hours On Call	-	ter Hours On Call	7AM-5PM		

	LLAS COUNTY BID TABULATION			VENDOR #1C		VENDOR #1E	VENDOR #2
ID NO. 2013-002-6150 CONTRACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL LIGHT TYPE RACKLESS CONVEYOR DISHWASHER UVFER: SAM COOPER PENING DATE: October 15, 2012 CONTRACT PERIOD:				Pasco Brokerage, Inc.	Pasco Brokerage, Inc.	Pasco Brokerage, Inc.	Sam Tel & Son Inc.
							300 Smith Street Farmingdale, NY 11735 Tel: 631-501-9700
	TRACT PERIOD: RCA CERTIFIED M/WBE VENDOR			N	No	NL-	Fax: 631-501-9709 No
	FORM SUBMITTED?			No Yes	Yes	No Yes	Yes
ALL	AS COUNTY TAXPAYER			No	No	No	No
OW	WERE YOU NOTIFIED?			Dallas County Website	Dallas County Website	Dallas County Website	BidNet
	DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT EXTENSION PRICE	UNIT EXTENSION PRICE	UNIT EXTENSION PRICE	UNIT EXTENSION PRICE
	Did your company check Dallas County website for any addendum(s) updates, and/or changes to the bid solicitation? Yes No			Yes	Yes	Yes	Yes
	Is the customer reference information included with your bid proposal: Yes No			Yes	Yes	Yes	Yes
	Specify the name, telephone number, and e-mail address of the account representative who will be handling this account: Contact Name:			Amy Leasure	Amy Leasure	Amy Leasure	
	Telephone No			972-596-3350	972-596-3350	972-596-3350	
	E-Mail Address:			aleasure@pascoinc.net	aleasure@pascoinc.net	aleasure@pascoinc.net	
	Specify the Alternative (Back-Up) Contact Person: Contact Name:			Kasay Hollon	Kasey Hollon	Kasey Hollon	
	Telephone No			Kasey Hollon 972-596-3350	972-596-3350	972-596-3350	
	E-Mail Address:			khollon@pascoinc.net	khollon@pascoinc.net	khollon@pascoinc.net	
						~.	
	Should your firm be awarded this contract, describe what (if any) portion of the bid requirements will be subcontracted out:	If awarded this contract, Pasco Brokerage will subcontract only the installation portion.			If awarded this contract, Pasco Brokerage will subcontract only the installation portion.	If awarded this contract, Pasco Brokerage will subcontract only the installation portion.	
	Cooperative Purchasing: Should other Governmental Entities decide to participate in this contract, would you, the awarded Contractor agrees that all terms, conditions, specifications, and pricing would apply to that entity?						
	Yes NO Note: All purchases by Governmental Entities other than Dallas County will be billed directly to that						
	Governmental Entity and paid by that Governmental Entity. Dallas County will not be responsible for other Governmental Entity's debt.						
	Does your firm/company have the required insurance coverage stated under SECTION 3 – <u>INSURANCE</u> <u>REOUREMENTS</u> and agree to comply with these requirements during the duration of this contract? Yes NO						
	If No, will your firm be able to acquire the required coverage within ten (10) days upon notification of contract award? Yes NO						
	Information on Provision of Health Insurance Coverage for Employees						
	a) Does your company provide health insurance coverage to its employees? Yes No			Yes	Yes	Yes	
	b) If your company does provide health insurance coverage to its employees, does the company share in the cost a minimum of:						
	State in the cost a minimum of. 90% for employee only coverage? Yes No 65% for family coverage? Yes No			Yes No	Yes No	Yes No	
	c) If your company does provide health insurance coverage to its employees, does the company share in the cost a minimum of 75% for employee only coverage and 50% for						
	family coverage? d) If your company provides health insurance coverage to its employees, is the coverage			Yes	Yes	Yes	
	comparable to the services provided by Dallas County as described in the attached summary plan description? (See Attachment A) Yes No			Yes	Yes	Yes	
	e) If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the subcontractors provide health insurance coverage and share in the cost?						
	Yes No In the event Dallas County elects to give a preference to a bidder who provides comparable health insurance, that bidder and any subcontractors will be required to provide additional documentation of the declared health insurance coverage.			Yes	Yes	Yes	
	For statistical purposes:						
	Please indicate to Dallas County whether the principal company owner is a: (Please check one)						
	[] Dallas County Tax Payer						
	[] Other County Tax Payer			X -Collin County	X -Collin County	X -Collin County	

DALLAS COUNTY BID TABULATION		1	VE	DOR #1C	VE	NDOR #1D	VEI	NDOR #1E	VE	NDOR #2
BID NO. 2013-002-6150			Pasco Brokerage	e, Inc.	Pasco Brokerag	ge, Inc.	Pasco Brokerag	e, Inc.	Sam Tel & Son	Inc.
CONTRACT FOR THE PURCHASE AND INSTALLATION OF A COMMERCIAL									200 0 10 01	
FLIGHT TYPE RACKLESS CONVEYOR DISHWASHER BUYER: SAM COOPER OPENING DATE: October 15, 2012									300 Smith Stree Farmingdale, N	
									Tel: 631-501-97	
CONTRACT PERIOD:									Fax: 631-501-9	
NCTRCA CERTIFIED M/WBE VENDOR			No		No		No		No	
EE01 FORM SUBMITTED?			Yes		Yes		Yes		Yes	
DALLAS COUNTY TAXPAYER			No		No		No		No	
HOW WERE YOU NOTIFIED?			Dallas County Website		Dallas County W	Vebsite	Dallas County Website		BidNet	
DESCRIPTION	ESTIMATED	U/I	UNIT	EXTENSION	UNIT	EXTENSION	UNIT	EXTENSION	UNIT	EXTENSION
	QUANTITY	0/1	PRICE		PRICE	2.112.1010.1	PRICE		PRICE	2.112.010.0
Please indicate whether your company is certified through an agency "other than" North										
Central Texas Regional Certification Agency (NCTRCA)? (Example: Statewide										
Historically Underutilized Business (HUB) Program, MBE, WBE, DBE, SBA, SBA,										
Veteran, 8(a)										
Yes No			Yes		Yes		Yes			
If yes, please provide the agency name and the applicable certification number below:										
Certifying Agency Name:			нив		нив		нив			
Registration or Certification Number:			175176072590	n	17517607259	00	175176072590	0		
Expiration Date:			22-Feb-2014		22-Feb-2014		22-Feb-2014	•		
Please indicate the manner in which you were notified of this solicitation:										
[] Daily Commercial Record										
[] Daily Commercial Record										
Dallas County Website				х	1	х		х		
[] Letter from Dallas County Purchasing Department										
[] Other: specify:									Bid Net	
									t bla manufaati	rer or model number
Thank you.									listed	irer or model number
Trans you.	1	I.	1		<u> </u>				10000	