TABULATION SHEET

BID NO. 2016-036-6573
Removal, Retro-Fit and Installation of New Mortise Lock Replacements at the Henry Wade Juvenile Justice Center

Buyer: James Gay (214) 653-7434
2/8/2016

Southern Folger Detention Equipment Company LLC
4634 S. Presa
San Antonio, Texas 78223
(210) 531-2719
(210) 533-2211 fax
James W. Harris
jharris@southernfolger.com

NCTRCA Certified Vendor
Certified By Other Agency
EE01 Submitted
Other County Taxpayer
Dallas County Taxpayer?
No
No
Yes

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>DESCRIPTION:</th>
<th>QUANTITY</th>
<th>UNIT COST</th>
<th>EXTENSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Southern Folger KR-D9378 Deadbolt Mortise Knob Locks</td>
<td>Install KR-D9378 Southern Folger Lock assemblies to replace 10128LK assemblies (No Substitutes)</td>
<td>60</td>
<td>$1,839.43</td>
</tr>
<tr>
<td>1A</td>
<td>Retrofit and install finish plates to cover install area and any necessary touch-up paint to affected area (Must match existing paint)- Install New strikes to fit existing jambs &amp; reinstall existing cylinders with new cams. Test and adjust existing locks for proper functioning. Final clean-up of work area and removal of all trash. The contractor shall be compliant with all local, State and Federal laws and regulations including required permitting and notifications.</td>
<td>$ Part of work w/above</td>
<td>$________</td>
<td></td>
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The Contractor, at its own expenses shall purchase and maintain the herein stipulated minimum insurance with companies duly licensed to do business in the State of Texas, possessing a current A.M. Best, Inc Rating of "A" or better

Grand Total | $ 1,839.43 | $ 110,365.80

Please answer the questions listed below

Did your company check Dallas County website(https://www.dallascounty.org/department/purchasing/currentbids.html) for any addendums, updates, and/or changes to the Solicitation? None

Should your firm be awarded this contract, describe what (if any) portion of the bid requirements will be subcontracted out. None

Bidders are required to indicate whether they have the required products on hand at the time of the bid or whether they will be required to obtain such upon award.

Please indicate by checking the appropriate box:
I/We do have the products in stock
I/We will be required to obtain the products upon award of bid. √

Specify any additional comments/cost/etc. included with your bid proposal, if applicable: We have the components in stock but will need to manufacture and assemble, not a stock item on shelf due to specific lock requirements

*Any deviations to the Dallas County bid specifications may result in rejection of the Bidders Proposal if found unacceptable by Dallas County.

Cooperative Purchasing: Should other Governmental Entities decide to participate in this contract, would you, the awarded Contractor agree that all terms, conditions, specifications, and pricing would apply to that entity? Yes

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

Specify Prompt/Early Payment Discount Terms (if any) 1 % 30 days
TABULATION SHEET

VENDOR #1
Southern Folger Detention Equipment Company LLC
4634 S. Presa
San Antonio, Texas 78223
(210) 531-2719
(210) 533-2211 fax
James W. Harris
jharris@southernfolger.com

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Certified By Other Agency
No
EE01 Submitted
Yes
Other County Taxpayer

Dallas County Taxpayer?


ITEM NO. DESCRIPTION: QUANTITY UNIT COST EXTENSION
AWARD Sole Respondent

INFORMATION ON PROVISION OF HEALTH INSURANCE COVERAGE FOR EMPLOYEES

Dallas County may consider the provision of health insurance coverage for employees in the bid evaluation process (see page 5, paragraph 5). Please complete the information below to assist in this evaluation.

Does your company provide health insurance coverage to its employees

Yes

If you company does provide health insurance coverage to its employees, does the company share in the cost a minimum of:

95% for employee only coverage

Yes

65% for Family coverage

Yes

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?

Yes

If your company provides health insurance coverage to its employees, is the coverage comparable to the services provided by Dallas County as described in the attached summary plan description? (See Attachment A)

Yes

If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the subcontractors provide health insurance coverage to their employees that compares to Dallas County's Health insurance coverage and share in the cost?

N/A

Specify the name, telephone number and email address of the account representative who will be handling and managing this account: Note: It is the responsibility of the awarded bidder to notify Dallas County of any account representative and/or contact person changes.

James W. Harris / #210-531-2719/ 4634 S. Presa /San Antonio, Tx 78223 / jharris@southernfolger.com

FOR INFORMATION PURPOSES PLEASE INDICATE THE MANNER IN WHICH YOU WERE NOTIFIED OF THIS SOLICITATION:

Daily Commercial Record
Letter from Dallas County Purchasing Department
Other: specify

Specify your firm's Texas Secretary of State Filing Number, Jurisdiction and Formation Date:

800594055, Texas, 1/02/2006

Conflict of Interest Questionnaire:

Yes

For vendor or other person doing business with local governmental entity:

(1) Name of person doing business with local governmental entity:

(2) Check this box if you are filing an update to a previously filed questionnaire.
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