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|                 | <b>TABULATION SHEET</b><br><br><b>BID NO. 2016-036-6573</b><br><b>Removal, Retro-Fit and Installation of New Mortise Lock Replacements at the Henry Wade Juvenile Justice Center</b><br><br><b>Buyer: James Gay (214) 653-7434</b><br><br>2/8/2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Page 2 <b>VENDOR #1</b><br><br><b>Southern Folger Detention Equipment Company LLC</b><br><br>4634 S. Presa<br>San Antonio, Texas 78223<br>(210) 531-2719<br>(210) 533-2211 fax<br><br>James W. Harris<br><a href="mailto:jharris@southernfolger.com">jharris@southernfolger.com</a> |                  |
|                 | <b>NCTRCA Certified Vendor</b><br><b>Certified By Other Agency</b><br><b>EE01 Submitted</b><br><b>Other County Taxpayer</b><br><b>Dallas County Taxpayer?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | No<br>No<br>Yes<br>✓                                                                                                                                                                                                                                                                |                  |
| <b>ITEM NO.</b> | <b>DESCRIPTION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>QUANTITY</b>                                                                                                                                                                                                                                                                     | <b>UNIT COST</b> |
|                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>AWARD Sole Respondent</b>                                                                                                                                                                                                                                                        |                  |
|                 | <b>INFORMATION ON PROVISION OF HEALTH INSURANCE COVERAGE FOR EMPLOYEES</b><br><br><b>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.</b><br><br>Does your company provide health insurance coverage to its employees<br><br>If you company does provide health insurance coverage to its employees, does the company share in the cost a minimum of:<br>95% for employee only coverage<br>65% for Family coverage<br><br>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?<br><br>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)<br><br>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?<br><br>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.<br><br><b>FOR INFORMATION PURPOSES PLEASE INDICATE THE MANNER IN WHICH YOU WERE NOTIFIED OF THIS SOLICITATION:</b><br><br>Daily Commercial Record<br>Dallas County Website<br>Letter from Dallas County Purchasing Department<br>Other: specify<br><br><b>Specify your firm's Texas Secretary of State Filing Number, Jurisdiction and Formation Date:</b><br><br><b>Conflict of Interest Questionnaire:</b><br>for vendor or other person doing business with local governmental entity:<br><br>(1) Name of person doing business with local governmental entity:<br>(2) Check this box if you are filing an update to a previously filed questionnaire. | Yes<br><br>Yes<br>Yes<br><br>Yes<br><br>N/A<br><br>James W. Harris / #210-531-2719/ 4634 S. Presa /San Antonio, Tx 78223 / <a href="mailto:jharris@southernfolger.com">jharris@southernfolger.com</a><br><br>✓<br><br>800594055, Texas, 1/02/2006                                   |                  |

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|                        | <p>TABULATION SHEET</p> <p style="text-align: right;">Page 3</p> <p><b>BID NO. 2016-036-6573</b><br/> <b>Removal, Retro-Fit and Installation of New Mortise Lock Replacements at the Henry Wade Juvenile Justice Center</b></p> <p><b>Buyer: James Gay (214) 653-7434</b><br/> 2/8/2016</p>                                                                                                                                                                                                                                                                                                                                                                           | <p><b>VENDOR #1</b></p> <p><b>Southern Folger Detention Equipment Company LLC</b></p> <p>4634 S. Presa<br/> San Antonio, Texas 78223<br/> (210) 531-2719<br/> (210) 533-2211 fax<br/> James W. Harris<br/> <a href="mailto:jharris@southernfolger.com">jharris@southernfolger.com</a></p> |  |
|                        | <p><b>NCTRCA Certified Vendor</b><br/> <b>Certified By Other Agency</b><br/> <b>EE01 Submitted</b><br/> <b>Other County Taxpayer</b><br/> <b>Dallas County Taxpayer?</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <p>No<br/> No<br/> Yes<br/> ✓</p>                                                                                                                                                                                                                                                         |  |
| <p><b>ITEM NO.</b></p> | <p><b>DESCRIPTION:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <p><b>QUANTITY</b></p> <p style="text-align: right;"><b>UNIT COST</b></p> <p style="text-align: right;"><b>EXTENSION</b></p>                                                                                                                                                              |  |
|                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><b>AWARD Sole Respondent</b></p>                                                                                                                                                                                                                                                       |  |
|                        | <p>(3) Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money</p> <p>(4) Describe each affiliation or business relationship with a person who is a local government officer of the local governmental entity that is the subject of this questionnaire.</p> <p>(5) Name of local government office with whom filer has affiliation or business relationship</p> <p>(6) Describe any other affiliation or business relationship that might cause a conflict of interest.</p> |                                                                                                                                                                                                                                                                                           |  |