22844 Attachment 8 Reseller Directory
Audio Visual Equipment and Accessories
Contractor Name: Epson

Reseller Information

Reseller

Company Name:	Audio Visual Innovations, Inc.
Address:	6301 Benjamin Road, Suite 101
	Tampa, FL 33634
Federal ID #:	59-1958935-001
NYS Vendor ID #:	1100153477
Contract Person:	Cindy Turner
Title:	Public Sector Contracts Manager
Telephone Number:	813 884-7168
Fax Number:	813 882-9508
E-mail:	Cindy.Turner@avispl.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller

Company Name:	Diversified
Address:	9555 Holsberry Rd Unit 3
	Pensacola, Fl 32534
Federal ID #:	22-3242083
NYS Vendor ID #:	1100165813
Contract Person:	Susan Caine Grant
Title:	Sales
Telephone Number:	850-449-0627
Fax Number:	205.985.4756
E-mail:	scaine@technical-innovation.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller

Company Name:	Howard Technology Solutions, a division of Howard Industries, Inc.
Address:	P O Box 1590
	Laurel, MS 39441
Federal ID #:	64-0466143
NYS Vendor ID #:	1100005502
Contract Person:	Yareasia Ellis ; Melissa Ward
Title:	Bid Services Manager ; Contract Manager
Telephone Number:	(601) 425-3181
Fax Number:	(601) 399-5077
E-mail:	bids@howardcomputers.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	Visionworx LLC dba CCS Presentation Systems
Address:	10393 Fortune Pkwy.
	Jacksonville, FL 32256
Federal ID #:	20-3312410
NYS Vendor ID #:	1100175194
Contract Person:	Suzanne Capasso
Title:	Bid and Contract Manager
Telephone Number:	(904) 998-7227
Fax Number:	(904) 998-7225
E-mail:	scapasso@ccssoutheast.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	United Data Technologies, Inc.
Address:	8825 NW 21st Terrace
	Doral, FL 33172
Federal ID #:	65-0566138
NYS Vendor ID #:	11000
Contract Person:	Mariana Lugaro
Title:	Director of Sales Operations
Telephone Number:	305-882-0435
Fax Number:	305-882-0436
E-mail:	mariana.lugaro@udtonline.com
MWBE Certification:	☐ Women owned ☒ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	Audio Fidelity Communications Corp. DBA:Whitlock
Address:	5607 N. Hiatus Road #300
	Tamarac, FL 33321
Federal ID #:	1100016019
NYS Vendor ID #:	54-0617014
Contract Person:	Allyson Durango
Title:	Customer Experience Manager
Telephone Number:	954-376-4011
Fax Number:	954-376-6837
E-mail:	durangoa@whitlock.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	CDW Government
Address:	200 N. Milwaukee Avenue
	Vernon Hills, IL 60061
Federal ID #:	364230110
NYS Vendor ID #:	1000009217
Contract Person:	Yolanda Blomquist
Title:	Deputy Program Manager
Telephone Number:	800.808.4239
Fax Number:	
E-mail:	yaguilar@cdw.com
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☒ Take Orders ☒ Ship Direct ☒ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	
Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	

Reseller	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contract Person:	
Title:	
Telephone Number:	
Fax Number:	
E-mail:	
MWBE Certification:	☐ Women owned ☐ Minority owned ☐ Both
SBE:	☐ NYS Small Business Enterprise (self-identified)
Reseller is Authorized to:	☐ Take Orders ☐ Ship Direct ☐ Receive Payment
Qualifying Criteria Applicable to this Reseller:	