ORIGIN ID:DEOA (248) 624-7070 DONNA SHENKARUK HUSKY ENVELOPE 1225 E. WEST MAPLE ROAD WALLED LAKE, MI 48390

Husky Envelope

	Ĵ	ISCP0009 Pricin	ng Page		
Item Description	Cost Per Case	Number of Envelopes in Case	Unit Cost Per Envelop	Estimated Annual Quantity	Extended Cos
6×91/2 BOOHE+ SCP0009	8.50	500	,017	6000	102,0000

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ISCP0009

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum I (Check the bo	Numbers Received: ox next to each addendum rec	eived)	
×	Addendum No. 1		Addendum No. 6
	Addendum No. 2		Addendum No. 7
	Addendum No. 3		Addendum No. 8
	Addendum No. 4		Addendum No. 9
	Addendum No. 5		Addendum No. 10
discussion hel	d between Vendor's represent	tation mad tatives and	enda may be cause for rejection of this bid. I de or assumed to be made during any oral d any state personnel is not binding. Only the decations by an official addendum is binding.
		Ho	Company Com
		_/l	0-10-2013 Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

CERTIFICATION AND SIGNATURE PAGE

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

	HUSKY ENVELOPE
	(Company)
	The ST Sh
	(Authorized Signature)
	RICK RESKE Contract administrator
	(Representative Name, Title)
24	18)624-7070 (248)624-5990
	(Phone Number) (Fax Number)
	10-10-2013
	(Date)

NY FURNITRATING TIME SELECTION DUE SON MITTE

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ISCP0009

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum	Numbers Received:

(Check the box next to each addendum received)

10/21/13 02:20:24 PM West Virginia Purchasing Division

(V)	Addendum No. 1	Į]	Addendum No. 6
	Addendum No. 2	[].	Addendum No. 7
[/]	Addendum No. 3]]	Addendum No. 8
[]	Addendum No. 4			Addendum No. 9
[]	Addendum No. 5	Ţ]	Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Authorized Signature

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

Revised 6/8/2012