

Manufacturer & Authorized Dealer (AD) Information

| Manufacturer/Contractor Information (for Ordering and Contract Administration Purposes) | | | |
|--|--------------------------------------|---|------------------------------------|
| Company Name: | Source International | | |
| Address | 545 Hartford Turnpike | | |
| | Shrewsbury, MA 01545 | | |
| | | | |
| Federal ID #: | 04-2752053 | | |
| NYS Vendor ID#: | 1000005264 | | |
| Minority/Women Owned or Small Business Indicate M, W or S | S | | |
| Contract Administrator Name: | Bethany Parks | | |
| Title: | National Sales Manager | | |
| Telephone Number: | 518-369-3663 | | |
| E-mail: | bparks@sourceinternationaldesign.com | | |
| FAX: | 508-842-1838 | | |
| Orders Placed Directly with Contractor <input checked="" type="checkbox"/> | | Orders Placed Directly with AD <input checked="" type="checkbox"/> | |
| Contract "Toll" Free Support Number: 800-454-9796 | 800-722-0474 | Guaranteed Product Delivery Timeframe: | Calendar 25-35 working dates |

BELOW ARE AUTHORIZED DEALERS DESIGNATED TO RECEIVE PAYMENT DIRECTLY

| Authorized Dealer Information | |
|---|--|
| Company Name: | Cueva Contract Inc. dba Interior Innovations |
| Address | 1016 Garden Road |
| | Utica, NY 13501 |
| Minority/Women Owned or Small Business Indicate M , W or S | M, W, S |
| Federal ID #: | 47-3870041 |
| NYS Vendor ID#: | 1100152048 |
| Contract Administrator Name: | Laura Cueva |
| Title: | President |
| Telephone Number: | 315-724-1985 |
| E-mail: | Laura.cueva@iicontractfurniture.com |
| FAX: | 315-266-1376 |
| Authorized Dealer Information | |
| Company Name: | The Prentice Group of NY Inc dba Prentice Office Environments |
| Address: | 472 Franklin Street |
| | Buffalo NY 14202 |
| Minority/Women Owned or Small Business Indicate M , W or S | S |
| Federal ID #: | 46-4007932 |
| NYS Vendor ID#: | 1100111873 |
| Contract Administrator Name: | Karen Flock |
| Title: | Sales Manager |
| Telephone Number: | 716-884-8452 |
| E-mail: | klf@prentice.us |
| FAX: | 716-884-0894Grass |

| Authorized Dealer Information | |
|---|--|
| Company Name: | Grassroots Contract Interiors |
| Address: | 255 Great Arrow Ave STE205 |
| | Buffalo NY 14207 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 45-2396499 |
| NYS Vendor ID#: | 110056068 |
| Contract Administrator Name: | Katherine Gunsolus |
| Title: | President |
| Telephone Number: | 716-247-5256 |
| E-mail: | Katherine@gcibuffalo.com |
| FAX: | 716-875-2500 |
| Authorized Dealer Information | |
| Company Name: | DRB Business Interiors Inc |
| Address: | 153 Regent Street |
| | Saratoga Springs, NY 12866 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 26-4582111 |
| NYS Vendor ID#: | 110034163 |
| Contract Administrator Name: | Dan Bullis |
| Title: | VP |
| Telephone Number: | 518-306-5233 |
| E-mail: | dbullis@drbbusinessinteriors.com |
| FAX: | 518-306-5256 |
| Authorized Dealer Information | |
| Company Name: | Syracuse office Environments |
| Address: | 375 Erie Blvd. West |
| | Syracuse, NY 13202 |
| Minority/Women Owned or Small Business Indicate M , W or S | S |
| Federal ID #: | 15-0510033 |
| NYS Vendor ID#: | 1000007334 |
| Contract Administrator Name: | Vince Sweeney |
| Title: | President |
| Telephone Number: | 315-476-9091 |
| E-mail: | vsweeney@soesy.com |
| FAX: | 315-476-9094 |
| Authorized Dealer Information | |
| Company Name: | EM&N Marketing Inc dba Quality Office Environments |
| Address: | 127 Main Street |
| | Geneseo, NY 14454 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 16-1608114 |
| NYS Vendor ID#: | 1100016792 |
| Contract Administrator Name: | Marcia Podhorecki |
| Title: | Owner |
| Telephone Number: | 585-243-5835 |
| E-mail: | Marcia.podhorecki@ki.com |
| FAX: | NA |

| Authorized Dealer Information | |
|---|--|
| Company Name: | FM Office Express, Inc. |
| Address: | 106 Despatch Drive East Rochester, NY14445 |
| Minority/Women Owned or Small Business Indicate M , W or S | M |
| Federal ID #: | 16-1478699 |
| NYS Vendor ID#: | 1000008256 |
| Contract Administrator Name: | Deborah Morales |
| Title: | General Manager |
| Telephone Number: | 585-238-2876 |
| E-mail: | dmorales@fmop.com |
| FAX: | 585-238-2899 |
| Authorized Dealer Information | |
| Company Name: | Staples Business Advantage |
| Address: | 14 Corporate Dr, Clifton Park, NY 12065 |
| Minority/Women Owned or Small Business Indicate M , W or S | N/A |
| Federal ID #: | 04-3390816 |
| NYS Vendor ID#: | 1000005286 |
| Contract Administrator Name: | Gilbert Van Geyte |
| Title: | Director, Furniture Sales |
| Telephone Number: | (781) 832-3221 |
| E-mail: | Gilbert.VanGeyte@Staples.com |
| FAX: | 978-557-6798 |
| Authorized Dealer Information | |
| Company Name: | Just the Right Stuff, Inc |
| Address: | 103 Twin Oaks Drive Syracuse NY 13206 |
| Minority/Women Owned or Small Business Indicate M , W or S | S |
| Federal ID #: | 16-1407121 |
| NYS Vendor ID#: | 1000029148 |
| Contract Administrator Name: | Neil Greeson |
| Title: | Vice President |
| Telephone Number: | 315-433-1309 |
| E-mail: | ngreeson@justtherightstuff.com |
| FAX: | 315-463-7118 |
| Authorized Dealer Information | |
| Company Name: | Genesee Office Interiors, Inc. |
| Address: | 565 Blossom Road * Suite H Rochester, New York 14610-1825 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 16-1335890 |
| NYS Vendor ID#: | 1100038101 |
| Contract Administrator Name: | Marj Cunningham |
| Title: | President |
| Telephone Number: | 585-224-8280 |
| E-mail: | goi@geneseeoffice.com |
| FAX: | 585-224-8285 |

| Authorized Dealer Information | |
|---|--|
| Company Name: | MMR Enterprises, Inc/ Standard Commercial Interiors |
| Address: | 107 Champlain Street Albany, NY 12204 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 14-1755454 |
| NYS Vendor ID#: | 1000027798 |
| Contract Administrator Name: | Megan Lanzetta |
| Title: | Principal |
| Telephone Number: | 518-433-0029 |
| E-mail: | MLanzetta@scireplay.com |
| FAX: | 518-433-0315 |
| Authorized Dealer Information | |
| Company Name: | Sedgwick Business Interiors |
| Address: | 176 Anderson Avenue Rochester, NY 14607 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 16-1530910 |
| NYS Vendor ID#: | 1000016189 |
| Contract Administrator Name: | Janet Kleiman |
| Title: | Director of Customer Service |
| Telephone Number: | 585-461-5070 |
| E-mail: | jkleiman@sedgwickbusiness.com |
| FAX: | 585-461-5595 |
| Authorized Dealer Information | |
| Company Name: | Roberts Office Interiors, Inc. (dba roi Office Interiors, Inc) |
| Address: | 144 Hangar Rd Rome, NY 13441 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 16-1560364 |
| NYS Vendor ID#: | 1000029484 |
| Contract Administrator Name: | Jennifer Christmas |
| Title: | Director of sales |
| Telephone Number: | 315 334 1388 |
| E-mail: | Jennifer@roiofficeinteriors.com |
| FAX: | 315 3344 4413 |
| Authorized Dealer Information | |
| Company Name: | Accent Commercial Furniture |
| Address: | 3 Interstate Ave Albany, NY 12205 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 14-1620511 |
| NYS Vendor ID#: | 1000006902 |
| Contract Administrator Name: | Michael Gleasman |
| Title: | CEO |
| Telephone Number: | 518-482-4000 |
| E-mail: | michaelg@accentny.com |
| FAX: | 518-482-0528 |

| Authorized Dealer Information | |
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| Company Name: | Millington Lockwood |
| Address: | 3901 Genesee Street |
| | Buffalo NY 14225 |
| Minority/Women Owned or Small Business Indicate M , W or S | S |
| Federal ID #: | 16-0529380 |
| NYS Vendor ID#: | 1000007442 |
| Contract Administrator Name: | Joe Conley |
| Title: | CFO |
| Telephone Number: | 716-633-5600 |
| E-mail: | jconley@millingtonlockwood.com |
| FAX: | 716-633-5641 |
| Authorized Dealer Information | |
| Company Name: | GLB Interiors LLC dba Innerspace Office Interiors |
| Address: | 3901 Genesee Street, Suite 600 |
| | Buffalo, NY 14225 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 46-1489996 |
| NYS Vendor ID#: | 1100103893 |
| Contract Administrator Name: | Gina R. Fahey |
| Title: | Owner/President |
| Telephone Number: | 716-276-8981 |
| E-mail: | gina@innerspaceoi.com |
| FAX: | 716-633-5641 |
| Authorized Dealer Information | |
| Company Name: | Workplace Interiors |
| Address: | 400 Packetts Landing |
| | Fairport, NY 14450 |
| Minority/Women Owned or Small Business Indicate M , W or S | N/A |
| Federal ID #: | 47-3430292 |
| NYS Vendor ID#: | 1100143379 |
| Contract Administrator Name: | Scott Maccaull |
| Title: | President |
| Telephone Number: | 585.425.7420 |
| E-mail: | smaccaull@workplaceint.com |
| FAX: | 585.512.8744 |
| Authorized Dealer Information | |
| Company Name: | LLV Office Concepts |
| Address: | 29 Church Street |
| | Saratoga Springs, NY 12866 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 27-0327635 |
| NYS Vendor ID#: | 1100052899 |
| Contract Administrator Name: | Thomas Tambasco |
| Title: | President |
| Telephone Number: | 518-587-0104 |
| E-mail: | tomt@llvoc.com |
| FAX: | 518-684-9257 |

| Authorized Dealer Information | |
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| Company Name: | Upstate Office Liquidators Inc dba Upstate Office Furniture |
| Address: | 718 Azon Road |
| | Johnson City NY 13790 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 16-1433004 |
| NYS Vendor ID#: | 1000015960 |
| Contract Administrator Name: | Sylvia Kerber |
| Title: | President |
| Telephone Number: | 607-722-9234 |
| E-mail: | skerber@upstateofficefurniture.com |
| FAX: | 607-722-3148 |
| Authorized Dealer Information | |
| Company Name: | Hudson Valley Office Furniture |
| Address: | 375 Main Street |
| | Poughkeepsie, NY 12601 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 14-1673799 |
| NYS Vendor ID#: | 10000014124 |
| Contract Administrator Name: | Steven Chickery |
| Title: | President |
| Telephone Number: | 845-471-7910 |
| E-mail: | Steven@thewowguys.com |
| FAX: | 845-471-3274 |
| Authorized Dealer Information | |
| Company Name: | Empire Office |
| Address: | 105 Madison Avenue |
| | New York, NY 10016 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 13-1945763 |
| NYS Vendor ID#: | 1100013749 |
| Contract Administrator Name: | Ervin C. Robertson |
| Title: | VP of Government, Education and Healthcare |
| Telephone Number: | 212-607-5650 |
| E-mail: | eroberson@empireoffice.com |
| FAX: | 212-607-5650 |
| Authorized Dealer Information | |
| Company Name: | Waldner's Business Environments |
| Address: | 125 Route 110 |
| | Farmingdale, NY 11735 |
| Minority/Women Owned or Small Business Indicate M , W or S | W |
| Federal ID #: | 11-1554704 |
| NYS Vendor ID#: | 1000023854 |
| Contract Administrator Name: | Susan Kennedy |
| Title: | |
| Telephone Number: | 631-844-9348 |
| E-mail: | skennedy@waldners.com |
| FAX: | |

| Authorized Dealer Information | |
|---|---|
| Company Name: | Office Resources |
| Address: | 1501 Broadway, Suite 802 New York, NY |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 36-4307675 |
| NYS Vendor ID#: | 1100084733 |
| Contract Administrator Name: | Holly Mickelson |
| Title: | Senior Financial Coordinator |
| Telephone Number: | 646-731-6921 |
| E-mail: | HollyMickelson@ori.com |
| FAX: | 212-944-8264 |
| Authorized Dealer Information | |
| Company Name: | Evenson Best LLC |
| Address: | 641 Avenue of the Americas, 6 th Floor New York, NY 10011 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 1303917122 |
| NYS Vendor ID#: | 1000006496 |
| Contract Administrator Name: | Michael Ciganek |
| Title: | CFO |
| Telephone Number: | 212-549-8050 |
| E-mail: | mciganek@evensonbest.com |
| FAX: | 212-548-8212 |
| Authorized Dealer Information | |
| Company Name: | Arenson Office Furnishings Inc. |
| Address: | 1115 Broadway, 6 th Floor New York, NY 10010 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 13-3176355 |
| NYS Vendor ID#: | 1000012985 |
| Contract Administrator Name: | Sue Marowitz |
| Title: | Vice President, Operations |
| Telephone Number: | 212-633-2400 |
| E-mail: | smarowitz@aof.com |
| FAX: | 212-633-2777 |
| Authorized Dealer Information | |
| Company Name: | Lane Office Furniture, Inc. |
| Address: | 256 West 38 th Street, 5 th floor New York, NY 10018 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 13-3680228 |
| NYS Vendor ID#: | 1000006437 |
| Contract Administrator Name: | Dan Hickey |
| Title: | President |
| Telephone Number: | 212-204-9839 |
| E-mail: | dh@laneoffice.com |
| FAX: | 212-693-2124 |

Authorized Dealer Information

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| Company Name: | Creative Office Pavilion |
| Address: | 180 Madison Avenue, 20 th florr New York, NY 10016 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 04-3147560 |
| NYS Vendor ID#: | 1100112818 |
| Contract Administrator Name: | Angelika Pienkowska |
| Title: | Office Administrator |
| Telephone Number: | 646-590-1700 |
| E-mail: | Angelika.pienkowska@cop-inc.com |
| FAX: | |

Authorized Dealer Information

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|---|---|
| Company Name: | Henricksen |
| Address: | 1040 Avenue of the Americas, 22 nd Floor New York, NY 10018 |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | 362649935 |
| NYS Vendor ID#: | 1100113335 |
| Contract Administrator Name: | Dave Bryant |
| Title: | General Manager |
| Telephone Number: | 212-897-9876 |
| E-mail: | d.bryant@henricksen.com |
| FAX: | |

Authorized Dealer Information

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|---|--|
| Company Name: | |
| Address: | |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | |
| NYS Vendor ID#: | |
| Contract Administrator Name: | |
| Title: | |
| Telephone Number: | |
| E-mail: | |
| FAX: | |

Authorized Dealer Information

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|---|--|
| Company Name: | |
| Address: | |
| Minority/Women Owned or Small Business Indicate M , W or S | |
| Federal ID #: | |
| NYS Vendor ID#: | |
| Contract Administrator Name: | |
| Title: | |
| Telephone Number: | |
| E-mail: | |
| FAX: | |