

ATTACHMENT 12
CONTRACTOR and RESELLER INFORMATION
(for ordering and contract administration purposes)

CONTRACTOR/COMPANY INFORMATION	
Company Name:	Rapp Productions, Inc dba FurnitureLab
Address (from first page of bid):	103 W Weaver St, Carrboro, NC 27510
Company Website:	www.furniturelab.com
Federal ID #:	56-1806405
NYS Vendor ID #:	1100043404
Contract Administrator Name:	Suzzette Jarman
Title:	Contracts Manager
Email:	contracts@furniturelab.com
Phone:	919-913-0270
Toll Free Phone:	800-449-8677

SALES/BILLING (if different from above)	
Contact Name:	Customer Service
Title:	Account Manager
Address:	103 W Weaver St, Carrboro, NC 27510
Email:	sales@furniturelab.com
Phone:	919-913-0270
Toll Free Phone:	800-449-8677

EMERGENCIES	
Contact Name:	Nathan Bearman
Title:	Sales Director / Owner
Address:	103 W Weaver St, Carrboro, NC 27510
Email:	contracts@furniturelab.com
Phone:	919-913-0270
Cell Phone:	919-913-0270

RESELLER INFORMATION	
Company Name:	EM&N Marketing, Inc. dba Quality Office Environments
Address:	127 Main St, Geneseo, NY 14454
Federal ID #:	16-1608114
NYS Vendor ID #:	1100016792
Contact Name:	Marcia Podhorecki
Title:	Owner/President
Email:	Marcia.podhorecki@ki.com
Hours of Availability:	8AM-5PM M-F
Phone:	585-243-5835
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

*If a Reseller is allowed to accept payment, they MUST have a NYS Vendor ID

RESELLER INFORMATION	
Company Name:	Bell Yorktown Inc dba Bell Office Furniture
Address:	333 Adams St, Bedford Hills, NY 10507-2001
Federal ID #:	13-2601292
NYS Vendor ID #:	1100043076
Contact Name:	Peter Mills
Title:	CEO
Email:	Peter.mills@bellofficefurniture.com
Hours of Availability:	8AM-5PM M-F
Phone:	914-242-7474
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	A.C. Desk Co., Inc.
Address:	249 Elm Pl, Mineola, NY 11501
Federal ID #:	11-2927139
NYS Vendor ID #:	1100108025
Contact Name:	Denise Ingerman
Title:	Office Manager
Email:	dringerman@acdeskonline.com
Hours of Availability:	8:30AM – 5PM M-F
Phone:	516-741-7979 x208
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Genesee Office Interiors, Inc
Address:	565 Blossom Rd, Ste H, Rochester, NY 14610-1825
Federal ID #:	16-1335890
NYS Vendor ID #:	1100038101
Contact Name:	Marj Cunningham
Title:	President
Email:	goi@geneseeoffice.com
Hours of Availability:	8AM – 5PM M-F
Phone:	585-224-8280
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
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RESELLER INFORMATION	
Company Name:	Stonehill Sales & Service, LLC
Address:	32 Heather Ln, Middletown, NY 10940
Federal ID #:	20-0816716
NYS Vendor ID #:	1100136735
Contact Name:	Carol Hill
Title:	President
Email:	chill@hvc.rr.com
Hours of Availability:	9AM-5PM M-F
Phone:	845-386-1234
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Waldner's Business Environments
Address:	125 Route 110, Farmingdale, NY 11735
Federal ID #:	11-1554704
NYS Vendor ID #:	1000023854
Contact Name:	Susan Kennedy
Title:	Executive Assistant
Email:	skennedy@waldners.com
Hours of Availability:	9AM – 5PM M-F
Phone:	631-844-9348
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Waldner's Business Environments
Address:	215 Lexington Ave, 9 th Fl, New York, NY 10016
Federal ID #:	11-1554704
NYS Vendor ID #:	1000023854
Contact Name:	Susan Kennedy
Title:	Executive Assistant
Email:	skennedy@waldners.com
Hours of Availability:	9AM – 5PM M-F
Phone:	631-844-9348
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

*If a Reseller is allowed to accept payment, they MUST have a NYS Vendor ID

RESELLER INFORMATION	
Company Name:	Waldner's Business Environments
Address:	411 Theodore Fremd Ave, 2 North, Rye, NY 10580
Federal ID #:	11-1554704
NYS Vendor ID #:	1000023854
Contact Name:	Susan Kennedy
Title:	Executive Assistant
Email:	skennedy@waldners.com
Hours of Availability:	9AM – 5PM M-F
Phone:	631-844-9348
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	EvensonBest
Address:	641 Avenue of the Americas, New York, NY 10011
Federal ID #:	13-3917122
NYS Vendor ID #:	1000006496
Contact Name:	Don Papaleo
Title:	Human Resource Director
Email:	dpapaleo@evensonbest.com
Hours of Availability:	9AM-5PM M-F
Phone:	212-549-8004
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	EvensonBest
Address:	400 Connell Dr, Berkeley Heights, NJ 07922
Federal ID #:	13-3917122
NYS Vendor ID #:	1000006496
Contact Name:	Don Papaleo
Title:	Human Resource Director
Email:	dpapaleo@evensonbest.com
Hours of Availability:	9AM-5PM M-F
Phone:	212-549-8004
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

*If a Reseller is allowed to accept payment, they MUST have a NYS Vendor ID

RESELLER INFORMATION	
Company Name:	EvensonBest
Address:	1000 Vermont Ave NW, Washington, DA 20005
Federal ID #:	13-3917122
NYS Vendor ID #:	1000006496
Contact Name:	Don Papaleo
Title:	Human Resource Director
Email:	dpapaleo@evensonbest.com
Hours of Availability:	9AM-5PM M-F
Phone:	212-549-8004
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	FM Office Express, Inc dba FM Office Products
Address:	106 Despatch Dr, East Rochester, NY 14445
Federal ID #:	16-1478699
NYS Vendor ID #:	1000008256
Contact Name:	Fabricio S Morales
Title:	President
Email:	fmorales@fmop.com
Hours of Availability:	8AM – 5PM M-F
Phone:	585-238-2880
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	FM Office Express, Inc
Address:	214 Duffield 38E, Brooklyn, NY 11201
Federal ID #:	16-1478699
NYS Vendor ID #:	1000008256
Contact Name:	Fabricio S Morales
Title:	President
Email:	fmorales@fmop.com
Hours of Availability:	8AM – 5PM M-F
Phone:	718-225-7100
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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RESELLER INFORMATION	
Company Name:	FM Office Express, Inc dba Merkel Donohue – Rochester
Address:	1349 University Ave Ste 2, Rochester, NY 14607
Federal ID #:	16-1478699
NYS Vendor ID #:	1000008256
Contact Name:	Fabricio S Morales
Title:	President
Email:	fmorales@fmop.com
Hours of Availability:	8AM – 5PM M-F
Phone:	585-325-7696
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	FM Office Express, Inc dba Merkel Donohue – Albany
Address:	1 Interstate Ave, Albany, NY 12205
Federal ID #:	16-1478699
NYS Vendor ID #:	1000008256
Contact Name:	Fabricio S Morales
Title:	President
Email:	fmorales@fmop.com
Hours of Availability:	8AM – 5PM M-F
Phone:	518-273-9359
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	FM Office Express, Inc dba Stevens Business Interiors – Syracuse
Address:	6804 Manlius Center Rd, East Syracuse, NY 13057
Federal ID #:	16-1478699
NYS Vendor ID #:	1000008256
Contact Name:	Fabricio S Morales
Title:	President
Email:	fmorales@fmop.com
Hours of Availability:	8AM – 5PM M-F
Phone:	518-273-9359
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
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RESELLER INFORMATION	
Company Name:	Dancker
Address:	291 Evans Way Somerville, NJ 08876
Federal ID #:	13-5021075
NYS Vendor ID #:	1000013562
Contact Name:	Christina Criscitiello
Title:	Director of Business Administration
Email:	ccriscitiello@dancker.com
Hours of Availability:	8:30AM – 5PM M-F
Phone:	908-252-6010
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	WB Mason Co
Address:	29 Mill St, Albany, NY 12204
Federal ID #:	04-2455641
NYS Vendor ID #:	1000011030
Contact Name:	Renee C Murphy
Title:	Contract Furniture Manager
Email:	Renee.murphy@wbmason.com
Hours of Availability:	8:30AM-5PM M-f
Phone:	888-926-2766 x8980
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	WB Mason
Address:	22 Veterans Lane, Plattsburgh, NY 12901
Federal ID #:	04-2455641
NYS Vendor ID #:	1000011030
Contact Name:	Brenda Heywood
Title:	Furniture Trainer
Email:	Brenda.heywood@wbmason.com
Hours of Availability:	8:30AM – 5PM M-F
Phone:	518-561-4584
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
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RESELLER INFORMATION	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contact Name:	
Title:	
Email:	
Hours of Availability:	
Phone:	
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
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Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contact Name:	
Title:	
Email:	
Hours of Availability:	
Phone:	
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	
Address:	
Federal ID #:	
NYS Vendor ID #:	
Contact Name:	
Title:	
Email:	
Hours of Availability:	
Phone:	
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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