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| <b>Contractor and Reseller Information</b> |
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|---|
| <b>Contractor Information (for Ordering and Contract Administration Purposes)</b> |
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|---|--|
| <b>1. CONTRACTOR/COMPANY INFORMATION</b>    |  |
| <b>Company Name:</b>                        | TOSHIBA AMERICA BUSINESS SOLUTIONS, INC. |
| <b>Address:</b><br>(From first page of RFP) | 9740 IRVINE BLVD.<br>IRVINE, CA 92618    |
| <b>Company Website:</b>                     | HTTP://BUSINESS.TOSHIBA.COM              |
| <b>Federal ID #:</b>                        | 33-0865305                               |
| <b>NYS Vendor ID #:</b>                     | 1000009105                               |

|                                     |                                       |
|-------------------------------------|---------------------------------------|
| <b>2. CENTRALIZED CONTRACT</b>      |                                       |
| <b>Contract Administrator Name:</b> | PAMELA TABACCHI                       |
| <b>Title:</b>                       | SENIOR CONTRACTS ADMINISTRATOR        |
| <b>Address:</b>                     | 9740 IRVINE BLVD.<br>IRVINE, CA 92618 |
| <b>Telephone Number:</b>            | 949.462.6168                          |
| <b>Toll Free Telephone Number:</b>  | 800.866.4361 EXT. 6168                |
| <b>Fax Number:</b>                  | 949.462.2557                          |
| <b>Toll Free Fax Number:</b>        |                                       |
| <b>E-mail:</b>                      | PAMELA.TABACCHI@TABS.TOSHIBA.COM      |

|                                    |  |
|------------------------------------|--|
| <b>3. SALES/BILLING</b>            |  |
| <b>Contact Name:</b>               | BILL IMBESI  |
| <b>Title:</b>                      | NATIONAL ACCOUNT MANAGER                             |
| <b>Address:</b>                    | 969 ROUTE 46 EAST, 5TH FLOOR<br>PARSIPPANY, NJ 07054 |
| <b>Telephone Number:</b>           | 516.551.5340   |
| <b>Toll Free Telephone Number:</b> |  |
| <b>Fax Number:</b>                 | 949.462.2557   |
| <b>Toll Free Fax Number:</b>       |  |
| <b>E-mail:</b>                     | WILLIAM.IMBESI@TABS.TOSHIBA.COM                      |

|                                    |   |
|------------------------------------|---|
| <b>4. MAINTENANCE/SERVICE</b>      |   |
| <b>Contact Name:</b>               | TIM DEVITT  |
| <b>Title:</b>                      | CLIENT SERVICES DELIVERY SPECIALIST                                       |
| <b>Address:</b>                    | 959 ROUTE 46 EAST<br>PARSIPPANY, NJ 07054                                 |
| <b>Telephone Number:</b>           | 813.406.4209  |
| <b>Toll Free Telephone Number:</b> |   |
| <b>Fax Number:</b>                 | 949.462.2557  |
| <b>Toll Free Fax Number:</b>       |   |
| <b>E-mail:</b>                     | TIM.DEVITT@TABS.TOSHIBA.COM   |
| <b>Hours of Availability:</b>      | 8:00 am to 5:00 pm Monday through Friday. After hours, call 813.428.4398. |

| <b>Reseller/Distributor Information</b>                 |   |
|---|---|
| <b>Reseller/Distributor</b>                             |   |
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 180 Kenneth Drive, Suite 200<br>Rochester, NY 14623   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | John McBride  |
| <b>Title:</b>   | Sales Manager   |
| <b>Telephone Number:</b>                                | 585.427.2222  |
| <b>Fax Number:</b>                                      | 585.427.0887  |
| <b>E-mail:</b>  | john.mcbride@tbs.toshiba.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 230 North Plank Road<br>Newburgh, NY 12550  |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Tom Becker  |
| <b>Title:</b>   | Executive VP  |
| <b>Telephone Number:</b>                                | 845.562.2468  |
| <b>Fax Number:</b>                                      | 845.562.2707  |
| <b>E-mail:</b>  | tom.becker@tbs.toshiba.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 6000 North Bailey Avenue, Suite 1F<br>Amherst, NY 14226   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Eric Fiebelkorn   |
| <b>Title:</b>   | General Manager   |
| <b>Telephone Number:</b>                                | 716.634.0322  |
| <b>Fax Number:</b>                                      | 716.634.0385  |
| <b>E-mail:</b>  | eric.fiebelkorn@tbs.toshiba.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 180 Kenneth Drive, Suite 200<br>Rochester, NY 14623   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Tim O'Neil  |
| <b>Title:</b>   | VP  |
| <b>Telephone Number:</b>                                | 585.427.2222  |
| <b>Fax Number:</b>                                      | 585.427.2891  |
| <b>E-mail:</b>  | tim.o'neil@tbs.toshiba.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 6800 Old Collamer Rd, Suite 5<br>East Syracuse, NY 13057  |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Thom McMahan  |
| <b>Title:</b>   | Sales Manager   |
| <b>Telephone Number:</b>                                | 315.414.1414  |
| <b>Fax Number:</b>                                      | 315.414.0284  |
| <b>E-mail:</b>  | thom.mcmahan@tbs.toshiba.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 15 Cornell Rd<br>Latham, NY 12110   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Tom Cook  |
| <b>Title:</b>   | General Manager   |
| <b>Telephone Number:</b>                                | 518.250.5502  |
| <b>Fax Number:</b>                                      | 518.250.5881  |
| <b>E-mail:</b>  | tom.cook@tbs.toshiba.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 114 Jericho Turnpike, Ste 3<br>Floral Park, NY 11001  |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Dimitrios Soursos   |
| <b>Title:</b>   | VPGM  |
| <b>Telephone Number:</b>                                | 516.616.0170  |
| <b>Fax Number:</b>                                      | 516.616.1978  |
| <b>E-mail:</b>  | dimitrios.soursos@tbs.toshiba.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 1500 Broadway, 27th Floor<br>New York NY 10036  |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Dimitrios Soursos   |
| <b>Title:</b>   | VPGM  |
| <b>Telephone Number:</b>                                | 646.532.2601  |
| <b>Fax Number:</b>                                      | 631.923.2396  |
| <b>E-mail:</b>  | dimitrios.soursos@tbs.toshiba.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA), INC.  |
| <b>Address:</b>   | 201 Old Country Road, Suite 100<br>Melville, NY 11747   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Dimitrios Soursos   |
| <b>Title:</b>   | VPGM  |
| <b>Telephone Number:</b>                                | 631.567.9400  |
| <b>Fax Number:</b>                                      | 631.923.2396  |
| <b>E-mail:</b>  | dimitrios.soursos@tbs.toshiba.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Toshiba Business Solutions (USA) Inc.   |
| <b>Address:</b>   | 40 Boroline Rd<br>Allendale, NJ 07401   |
| <b>Federal ID #:</b>                                    | 33-0622309  |
| <b>NYS Vendor ID #:</b>                                 | 1100006357  |
| <b>Contract Person:</b>                                 | Dimitrios Soursos   |
| <b>Title:</b>   | VP/GM   |
| <b>Telephone Number:</b>                                | 201.465.1375  |
| <b>Fax Number:</b>                                      | 631.923.2396  |
| <b>E-mail:</b>  | dimitrios.soursos@tbs.toshiba.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Corporate Computer Solutions Inc.   |
| <b>Address:</b>   | 55 Halstead Avenue<br>Harrison, NY 10528  |
| <b>Federal ID #:</b>                                    | 13-3352744  |
| <b>NYS Vendor ID #:</b>                                 | 1000006353  |
| <b>Contract Person:</b>                                 | Ann Martino   |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 914.835.1105 x 101  |
| <b>Fax Number:</b>                                      | 914.835.5947  |
| <b>E-mail:</b>  | AMartino@corporatecomputersol.com   |
| <b>MWBE Certification:</b>                              | <input checked="" type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both                               |
| <b>SBE:</b>   | <input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)   |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Facsimile Comm Ind Inc dba Atlantic Tomorrows Office  |
| <b>Address:</b>   | 520 White Plans Road<br>Tarrytown NY 10591  |
| <b>Federal ID #:</b>                                    | 131947545   |
| <b>NYS Vendor ID #:</b>                                 | 1000026064  |
| <b>Contract Person:</b>                                 | Larry Weiss   |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 914.674.4500  |
| <b>Fax Number:</b>                                      | 914.674.4477  |
| <b>E-mail:</b>  | lweiss@tomorrowsoffice.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Facsimile Comm Ind Inc dba Atlantic Tomorrows Office  |
| <b>Address:</b>   | 520 White Plans Road<br>Tarrytown NY 10591  |
| <b>Federal ID #:</b>                                    | 131947545   |
| <b>NYS Vendor ID #:</b>                                 | 1000026064  |
| <b>Contract Person:</b>                                 | Larry Weiss   |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 914.674.4500  |
| <b>Fax Number:</b>                                      | 914.674.4477  |
| <b>E-mail:</b>  | lweiss@tomorrowsoffice.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Eagle Systems Inc   |
| <b>Address:</b>   | 201 Pine Street<br>Jamestown, NY 14701  |
| <b>Federal ID #:</b>                                    | 161410112   |
| <b>NYS Vendor ID #:</b>                                 | 1000055352  |
| <b>Contract Person:</b>                                 | Rick Smith  |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 716.893.0506  |
| <b>Fax Number:</b>                                      |   |
| <b>E-mail:</b>  | rsmith@eagle-systems.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Eagle Systems Inc   |
| <b>Address:</b>   | 2421 Harlem Rd<br>Buffalo, NY 14225   |
| <b>Federal ID #:</b>                                    | 161410112   |
| <b>NYS Vendor ID #:</b>                                 | 100005352   |
| <b>Contract Person:</b>                                 | Rick Smith  |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 716.893.0506  |
| <b>Fax Number:</b>                                      | 716.897.3081  |
| <b>E-mail:</b>  | rsmith@eagle-systems.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Electronic Office Products  |
| <b>Address:</b>   | 3258 South Broadway<br>Saratoga Springs, NY 12866   |
| <b>Federal ID #:</b>                                    | 202960229   |
| <b>NYS Vendor ID #:</b>                                 | 1000016654  |
| <b>Contract Person:</b>                                 | Collette Alonzo   |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 518.587.8600  |
| <b>Fax Number:</b>                                      | 518.587.4556  |
| <b>E-mail:</b>  | info@eopcopiers.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)   |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Leslie Digital Imaging LLC  |
| <b>Address:</b>   | 50 Jericho Quadrangle, STE 115<br>Jericho, NY 11753   |
| <b>Federal ID #:</b>                                    | 11-3523525  |
| <b>NYS Vendor ID #:</b>                                 | 1000012327  |
| <b>Contract Person:</b>                                 | Jay Feldman   |
| <b>Title:</b>   | VP of Sales   |
| <b>Telephone Number:</b>                                | 516.877.9100  |
| <b>Fax Number:</b>                                      | 516.739.0688  |
| <b>E-mail:</b>  | jfeldman@myldi.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Leslie Digital Imaging LLC  |
| <b>Address:</b>   | 2421 Harlem Rd<br>New York, NY 10036  |
| <b>Federal ID #:</b>                                    | 11-3523525  |
| <b>NYS Vendor ID #:</b>                                 | 1000012327  |
| <b>Contract Person:</b>                                 | Jim Coler   |
| <b>Title:</b>   | Account Manager   |
| <b>Telephone Number:</b>                                | 516.877.9100  |
| <b>Fax Number:</b>                                      | 516.739.0688  |
| <b>E-mail:</b>  | jcoler@myldi.com  |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Metroland Business Machines   |
| <b>Address:</b>   | 25 Kraft Avenue<br>Albany, NY   |
| <b>Federal ID #:</b>                                    | 14-1560263  |
| <b>NYS Vendor ID #:</b>                                 | 1000001682  |
| <b>Contract Person:</b>                                 | Dan Neary   |
| <b>Title:</b>   | Account Manager   |
| <b>Telephone Number:</b>                                | 518.452.2600  |
| <b>Fax Number:</b>                                      | 518.452.2603  |
| <b>E-mail:</b>  | dneary@metrobusma.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)   |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | TGI Office Automation (subsidiary of T&G Industries)  |
| <b>Address:</b>   | 120 3rd Street<br>Brooklyn, NY 11231  |
| <b>Federal ID #:</b>                                    | 112202153   |
| <b>NYS Vendor ID #:</b>                                 | 1000011522  |
| <b>Contract Person:</b>                                 | Frank Grasso  |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 718.237.0060  |
| <b>Fax Number:</b>                                      | 718.694.9610  |
| <b>E-mail:</b>  | fgrasso@tgioa.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | TGI Office Automation (subsidiary of T&G Industries)  |
| <b>Address:</b>   | 1860 Walt Whitman Road<br>Melville, NY 11747  |
| <b>Federal ID #:</b>                                    | 112202153   |
| <b>NYS Vendor ID #:</b>                                 | 1000011522  |
| <b>Contract Person:</b>                                 | Frank Grasso  |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 516.349.8787  |
| <b>Fax Number:</b>                                      | 516.349.8780  |
| <b>E-mail:</b>  | fgrasso@tgioa.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | TGI Office Automation (subsidiary of T&G Industries)  |
| <b>Address:</b>   | 1450 Broadway<br>New York, NY 10004   |
| <b>Federal ID #:</b>                                    | 112202153   |
| <b>NYS Vendor ID #:</b>                                 | 1000011522  |
| <b>Contract Person:</b>                                 | Frank Grasso  |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 212.344.4330  |
| <b>Fax Number:</b>                                      | 212.398.6539  |
| <b>E-mail:</b>  | fgrasso@tgioa.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input type="checkbox"/> NYS Small Business Enterprise (self-identified)  |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |   |
|---|---|
| <b>Company Name:</b>                                    | Twin Tier Imaging Systems   |
| <b>Address:</b>   | 504 Pennsylvania Avenue<br>Elmira, NY 14904   |
| <b>Federal ID #:</b>                                    | 161242373   |
| <b>NYS Vendor ID #:</b>                                 | 1100052922  |
| <b>Contract Person:</b>                                 | George Skillman   |
| <b>Title:</b>   | President   |
| <b>Telephone Number:</b>                                | 607.732.0330  |
| <b>Fax Number:</b>                                      | 607.732.6409  |
| <b>E-mail:</b>  | gskilly@yahoo.com   |
| <b>MWBE Certification:</b>                              | <input type="checkbox"/> Women owned <input type="checkbox"/> Minority owned <input type="checkbox"/> Both  |
| <b>SBE:</b>   | <input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)   |
| <b>Reseller is Authorized to:</b>                       | <input checked="" type="checkbox"/> Take Orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |   |

| <b>Reseller/Distributor</b>                             |  |
|---|--|
| <b>Company Name:</b>                                    |  |
| <b>Address:</b>   |  |
|   |  |
| <b>Federal ID #:</b>                                    |  |
| <b>NYS Vendor ID #:</b>                                 |  |
| <b>Contract Person:</b>                                 |  |
| <b>Title:</b>   |  |
| <b>Telephone Number:</b>                                |  |
| <b>Fax Number:</b>                                      |  |
| <b>E-mail:</b>  |  |
| <b>MWBE Certification:</b>                              |  |
| <b>SBE:</b>   |  |
| <b>Reseller is Authorized to:</b>                       |  |
| <b>Qualifying Criteria Applicable to this Reseller:</b> |  |