

Manufacturer & Authorized Dealer (AD) Information

Manufacturer/Contractor Information (for Ordering and Contract Administration Purposes)			
Company Name:	Irwin Seating Company		
Address:	3251 Fruit Ridge Ave NW Grand Rapids, MI 49544		
Federal ID #:	38-1333053		
NYS Vendor ID#:	1000009240		
Minority/Women Owned or Small Business Indicate M, W or S	None		
Contract Administrator Name:	Fred Hannapel		
Title:	Sales Manager		
Telephone Number:	616.574.7246		
E-mail:	fred.hannapel@irwinseating.com		
FAX:	616.574.7411		
Orders Placed Directly with Contractor **	Orders Placed Directly with AD **		
Contract "Toll" Free Support Number:	1-800-759-7328	Guaranteed Product Delivery Timeframe:	Calendar 60-120 days ARO

BELOW ARE AUTHORIZED DEALERS DESIGNATED TO RECEIVE PAYMENT DIRECTLY

Authorized Dealer Information			
Company Name:	JS McHugh		
Address:	839 Stewart Ave, Garden City NY 11530		
Minority/Women Owned or Small Business Indicate M , W or S			
Federal ID #:	113138962		
NYS Vendor ID#:	1000012115		
Contract Administrator Name:	Joan Jesberger		
Title:			
Telephone Number:	516-222-2200		
E-mail:	jjesberger@jsmchugh.com		
FAX:			
Authorized Dealer Information			
Company Name:	E.A. Fisher Co., Div. of American Mfrs. Sales Group		
Address:	257 Mamaroneck Ave., Suite 208, Mamaroneck, NY 10543		
Minority/Women Owned or Small Business Indicate M , W or S			
Federal ID #:	131955561		
NYS Vendor ID#:	1000012594		
Contract Administrator Name:	Thomas J Carney		
Title:	VP		
Telephone Number:	914.393.8848		
E-mail:	tcarneysr@gmail.com		
FAX:			

Authorized Dealer Information	
Company Name:	Professional Furnishings & Equipment Inc
Address:	2191 George Urban Blvd., Depew, NY 14043
Minority/Women Owned or Small Business Indicate M , W or S	
Federal ID #:	161515718
NYS Vendor ID#:	1000029379
Contract Administrator Name:	Greg Stalker
Title:	President
Telephone Number:	716.685.6885
E-mail:	gs@profurnishings.com
FAX:	

Authorized Dealer Information	
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	
Company Name:	
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Federal ID #:	
NYS Vendor ID#:	
Contract Administrator Name:	
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