

**Group 20915 Award 23295 - Furniture, All Types (except Hospital Room and Patient Handling)(Statewide)
ATTACHMENT 12 – CONTRACTOR and RESELLER/DISTRIBUTOR INFORMATION
(for ordering and contract administration purposes)**

Contractor/Company Information	
Company Business Name:	Case Systems, Inc.
D/B/A – Doing Business As (if applicable):	
Address:	2700 James Savage Rd., Midland, MI 48642
Company Website:	www.casesystems.com
Federal Tax ID #:	383139894
NYS Vendor ID #:	1000009254
Contact for Contract Administration Issues	
Contract Administrator Name:	Curt Blackhurst
Title:	Inside Sales Manager
Address (if different from above):	
Email:	curt.blackhurst@casesystems.com
Phone:	989-496-9510
Toll Free Phone:	
Contact for Contract Sales/Billing (if different from above)	
Contact Name:	
Title:	
Address:	
Email:	
Phone:	
Toll Free Phone:	
Business hours (Specify M-F, Sat, Sun):	
Contact for Emergencies	
Contact Name:	Andrew Loucy
Title:	Territory Manager
Address:	7701 Maltage Drive, Liverpool, NY 13090
Email:	aloucy@neis.cc
Phone:	315-622-3121
Cell Phone:	315-345-7186
Invoicing (Entity information that will appear on invoices, for orders placed directly with the Contractor, if different from Contractor/Company information above)	
Invoicing Entity Company Name:	Northeast Interior Systems, Inc.
Federal Tax ID #:	14-1589950
NYS Vendor ID #:	11-00034941
Is payment made to the above Entity/Federal ID#?	Yes
<i>Note: If yes, the invoicing entity NYS Vendor ID MUST be referenced on Purchase Orders</i>	

Enter the information requested below for each Reseller/Distributor that will provide Product to Authorized Users. In Columns B through E, indicate if the location is a NYS certified Minority- or Women-Owned Business Enterprise, Service-Disabled Veteran Owned Business Division, or a Small Business* (self-identified). In Columns H through J, indicate if the Reseller/Distributor is authorized to take orders, deliver Product, and/or receive payment. If a Reseller/Distributor is allowed to accept payment, they MUST have a NYS Vendor ID.
 *A "Small Business" means a business which: (a) is resident in New York State; (b) is independently owned and operated; (c) is not dominant in its field; and, (d) employs one hundred or fewer persons

Company Business Name	WBE	MBE	SDVOB	SB	FEIN	NYS Vendor ID	Take Orders	Deliver Product	Receive Payment	Over-the-Counter Hours	Street Address	City	Zip Code	County	Contact Name	Telephone Number	Fax Number	Email Address	Restrictions Applicable to this Contractor Location
Northeast Interior Systems, Inc.					14-1589950	1100034941	X	X	X	M-F 8:00-5:00	7701 Maltage Drive	Liverpool	13090	Onondaga	Andrew Loucy	315-622-3121		aloucy@neis.cc	