

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:	Furniture Pro Corp
D/B/A – Doing Business As (if applicable):	
Address:	2 Twin Pines Drive, Pomona, NY 10970
Company Website:	www.FurniturePro.Net
Federal Tax ID #:	20-4425487
NYS Vendor ID #:	1100044884
Contact for Contract Administration issues	
Contract Administrator Name:	David Ginsberg
Title:	Director of Sales
Address (if different from above):	
Email:	David@FurniturePro.Net
Phone:	845-362-2061
Toll Free Phone:	800-737-9698
Contact for Contract Sales/Billing (if different from above)	
Contact Name:	Miriam Ginsberg; Jeff Aizer
Title:	Customer Solutions
Address:	2 Twin Pines Drive, Pomona, NY 10970
Email:	Sales@FurniturePro.Net
Phone:	845-362-2061
Toll Free Phone:	800-737-9698
Business hours (Specify M-F, Sat, Sun):	M-Th 9-5, Friday: Fall/Winter 9-2; Spring/Summer 9-4
Contact for Emergencies	
Contact Name:	David Ginsberg
Title:	Director of Sales
Address:	2 Twin Pines Drive, Pomona, NY 10970
Email:	David@FurniturePro.Net
Phone:	845-362-2061
Cell Phone:	845-290-2501
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:	
Federal Tax ID #:	
NYS Vendor ID #:	
Is payment made to the above Entity/Federal ID#?	
<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
AMC Transfer	X			X	11-3445393	1100164638	X	X	X	M-F 9-5	3580 Oceanside Road, Unit 6	Oceanside	11572	Nassau	Nicole Diaks	516-599-0633	none	ndiaks@amctransfer.org	
Art G. Werksman			X	X	16-1236782	1100191267	X			M-F 9-5	6295 E Molloy Rd Suite 5	East Syracuse	13057	Onondaga	Brian Hammond	315-288-5212	none	brian@awarep.com	
Vision Construction & Installation, Inc		X		X	80-0571400	1100224057	X	X	X	M-F 9-5	245 Hendrix Street	Brooklyn	11207	Kings	Matthew Moore	929-234-3922	none	mmuore@vision-inc.net	
All-Star Furniture Installations Inc.	X			X	11-3635575	1000024981	X	X	X	M-F 9-5	96 Bond St	Westbury	11590	Nassau	Melissa Maricondo	(631) 249-3339	none	mmaricondo@allstarfurn.com	
AmVet Office Supplies		X	X	X	82-3777882	1100207811	X			M-F 9-5	121-A Quail St.	Albany	12206	Albany	Durvell Smith	518-650-8788	(518) 818-0929	dsmith@amvetofficesupplies.com	
Angel Haven Enterprises Inc. (DBA: Rapid Refill)			X		46-1740832	1100166296	X			M-F 9-5	1858 Colvin Blvd	Tonawanda	14150	Erie	Daniel Novick	(716) 712-7823	none	daniel.novick@aol.com ; Mitch.rapid.refill@aol.com	
SDVOSB Materials Technology & Supply LLC			X	X	82-2895228	1100196751	X	X		M-F 9-5	132-20 Jamaica Ave, Suite B	Richmond Hill	11418	Queens	Harrison Kendall	917 216-9400	none	jonathan.kendall@SDVOSBmaterials.com	
Urban DenCITY		X		X	46-4441430	1100320304	X			M-F 9-5	3019 Hone Ave.	Bronx	10469	Bronx	Bary Steele	917-545-4205	none	gary@urbandencityny.com	