ATTACHMENT 10
CONTRACTOR and RESELLER/DISTRIBUTOR INFORMATION
(for ordering and contract administration purposes)

NOTE: Contractors MUST submit an updated form to OGS EVERY TIME a reseller/distributor is added or removed. If a contract has Minority- and/or Women-owned Business Enterprise (MWBE) participation goals, in addition to this form, Contractors MUST submit to OGS a completed MWBE 100 form EVERY TIME they add or remove a reseller that has been certified by NYS as an MWBE.

The MWBE 100 form is available under the "Commodity & Service Contracts" section at: https://ogs.ny.gov/mwbe/forms

CONTRACTOR/COMPANY INFORMATION	
Company Business Name:	B&G FOODSERVICE EQUIPMENT, LLC
D/B/A – Doing Business As (if applicable):	
Address:	60 COMMERCE AVENUE, ALBANY NY 12206
Company Website:	WWW.BGRESTSUPPLY.COM
Federal Tax ID #:	20-4926551
NYS Vendor ID #:	1000019464

CONTRACT ADMINISTRATION	
Contract Administrator Name:	TRICIA DAMBRAUSKAS
Title:	MEMBER/OWNER
Address (if different from above):	
Email:	TRICIA@BGRESTSUPPLY.COM
Phone:	518-482-2111
Toll Free Phone:	

SALES/BILLING (if different from above)	
Contact Name:	APRIL PELTIER
Title:	OFFICE MANAGER
Address:	60 COMMERCE AVE, ALBANY, NY 12206
Email:	APRIL@BGRESTSUPPLY.COM
Phone:	518-482-2111
Toll Free Phone:	
Business Hours (Specify M-F, Sat, Sun):	

EMERGENCIES	
Contact Name:	BOB POWERS
Title:	MEMBER/OWNER
Address:	48 EAGLE STREET, PITTSFIELD, MA 01201
Email:	BOB@BGRESTSUPPLY.COM
Phone:	413-442-0390
Cell Phone:	413-441-3989

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#? *Note: If yes, the invoicing entity NYS Vendor ID MUST be referenced on Purchase Orders*	☐ Yes ☐ No