

**Lee County Board Of County Commissioners  
Agenda Item Summary**

**Blue Sheet No. 20021416**

**1. REQUESTED MOTION:**

**ACTION REQUESTED:** Approve award of Project # EX030178, the purchase of five (5) new Alamo Hydro-15 rotary mowers for Lee County DOT from Gaithersburg Equipment Company at the prices given in the Federal General Services Administration Contract #GS-30F-0010K. The GSA price is \$22,406.50 each, including options and delivery, for a grand total amount of \$112,032.50.

**WHY ACTION IS NECESSARY:** Section 11.0.3.1 of the Lee County Purchasing and Payment Procedures Manual exempts "the purchase of equipment that has gone through the Administrative Code Procedure, such as State Contracts or Federal General Services Administration Schedules, providing the purchase, rental, or lease amount does not exceed \$50,000.00". As this expenditure will exceed \$50,000.00, Board approval is required.

**WHAT ACTION ACCOMPLISHES:** The new equipment will enable DOT to replace its aging rotary mower fleet and will be used to mow the County's right-of-ways. The units replace assets #031935, #031883, #031934, #031937, and #031936.

**2. DEPARTMENTAL CATEGORY:  
COMMISSION DISTRICT #**

**C9E**

**3. MEETING DATE:**

**01-07-2003**

**4. AGENDA:**

- CONSENT
- ADMINISTRATIVE APPEALS
- PUBLIC WALK ON
- TIME REQUIRED:

**5. REQUIREMENT/PURPOSE:  
(Specify)**

- STATUTE
- ORDINANCE
- ADMIN. AC-4-1
- CODE
- OTHER

**6. REQUESTOR OF INFORMATION:**

- A. COMMISSIONER
- B. DEPARTMENT Transportation
- C. DIVISION

BY: Scott Gilbertson, P.E. Director

**7. BACKGROUND:**

--BACKGROUND BEGINS ON PAGE TWO--

**8. MANAGEMENT RECOMMENDATIONS:**

**9. RECOMMENDED APPROVAL:**

| A<br>Department Director | B<br>Purchasing or Contracts    | C<br>Human Resources | D<br>Other | E<br>County Attorney           | F<br>Budget Services |                |                  |             | G<br>County Manager |
|--------------------------|---------------------------------|----------------------|------------|--------------------------------|----------------------|----------------|------------------|-------------|---------------------|
| <i>[Signature]</i>       | <i>Janet Sheehan</i><br>12-9-02 | N/A                  |            | <i>[Signature]</i><br>12/17/02 | OA<br>RK 12/17       | OM<br>12/18/02 | Risk<br>12/18/02 | GC<br>12/18 | <i>[Signature]</i>  |

**10. COMMISSION ACTION:**

- APPROVED
- DENIED
- DEFERRED
- OTHER

Rec. by CoAtty  
Date: 12/16/02  
Time: 4:02 PM  
Forwarded To: Budget

RECEIVED BY  
COUNTY ADMIN. 12/16/02  
COUNTY ADMIN. 12/19 830  
FORWARDED TO: BU

--BACKGROUND CONTINUED FROM PAGE ONE--

On December 3, 2002, the Division of Purchasing received a request from Lee County DOT and the Division of Fleet Management to purchase five (5) new Alamo Hydro-15 rotary mowers for Lee County DOT from Gaithersburg Equipment Company at the prices given in the Federal General Services Administration Contract #GS-30F-0010K.

Section 11.0.3.1 of the Lee County Purchasing and Payment Procedures Manual exempts "the purchase of equipment that has gone through the Administrative Code Procedure, such as State Contracts or Federal General Services Administration Schedules, providing the purchase, rental, or lease amount does not exceed \$50,000.00". As this expenditure will exceed \$50,000.00, Board approval is required.

Therefore, Board approval is requested to purchase five (5) new Alamo Hydro-15 rotary mowers for Lee County DOT from Gaithersburg Equipment Company at the prices given in the Federal General Services Administration Contract #GS-30F-0010K. The GSA price is \$22,406.50 each, including options and delivery, for a grand total amount of \$112,032.50.

Funds are available: PC5410117500.506430

ATTACHMENTS:

- (1) Department's Request for Purchase
- (2) Vendor's Quotation
- (3) GSA Contract #GS-30F-0010K



# LEE COUNTY

# ATTACHMENT #1

DIVISION OF  
FLEET MANAGEMENT  
03 DEC 12:04

**To:** Janet Sheehan, Purchasing Director  
**From:** Marilyn Rawlings, Fleet Manager *MR*  
**Date:** 12/2/2002  
**Re:** Blue Sheet for the purchase (5) five Alamo Hydro-15 Rotary Mowers

---

Please prepare a Blue Sheet as follows: (5) Alamo Hydro-15 Rotary Mowers.

#### **ACTION REQUESTED:**

Approve the purchase of (5) Alamo Hydro-15 Rotary Mowers from Gaithersburg Equipment Company based on Federal GSA Pricing Schedule. The base price of each mower is \$22,406.50. Approve the purchase from Gaithersburg Equipment Company of Gaithersburg Maryland.

Total cost is \$112,032.50.

#### **WHY ACTION IS NECESSARY:**

Section 11.0.3.1 of the Lee County Purchasing and Payment Procedures Manual exempts "the purchase of equipment that has gone through the Administrative Code Procedure, such as State Contracts or Federal General Services Administration Schedules, providing the purchase, rental, or lease amount does not exceed \$50,000." As this expenditure will exceed \$50,000, Board approval is necessary.

#### **WHAT ACTION ACCOMPLISHES:**

Fleet Management received a request from the Department of Transportation to replace the aging rotary mower fleet, (#031935, #031883, #031934, #031937 and #031936). These units will be used in right of way mowing. These five pieces of equipment have met Fleet's replacement criteria. (See attached).

#### **BACKGROUND:**

Lee County Fleet Management received a request from the Department of Transportation to purchase five (5) rotary mowers. This is a replacement purchase to their Fleet. This machinery is necessary to mow on the County right-of-way to keep up with the ever-increasing road maintenance demand.

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

1. DEPARTMENT/DIVISION: (name) D.O.T / OPERATIONS  
(number) \_\_\_\_\_

2. REQUESTED BY: (print) JONATHAN D. JOSEPH SR PHONE #: 694-3334 X370

3. IS THIS A REPLACEMENT EQUIPMENT OR VEHICLE ?  YES |  NO  
If yes: Asset #: 031934 Yr: 1998 Make: ALAMO Model: HYDRO-15<sup>T</sup> Meter: N/A

4. WHAT TYPE OF EQUIPMENT OR VEHICLE ARE YOU REQUESTING?  
Select all appropriate boxes:
- |   |   |                                  |  |                                       |                                      |
|---|---|----------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sedan            | <input type="checkbox"/> Mid-Size                   | <input type="checkbox"/> 1/4 Ton | <input type="checkbox"/> 2 Door                    | <input type="checkbox"/> Cargo        | <input type="checkbox"/> Gasoline    |
| <input type="checkbox"/> Station Wagon    | <input type="checkbox"/> Full-Size                  | <input type="checkbox"/> 1/2 Ton | <input type="checkbox"/> 3 Door L-Side             | <input type="checkbox"/> 7 Passenger  | <input type="checkbox"/> Diesel      |
| <input type="checkbox"/> Sport Util Veh   | <input type="checkbox"/> Regular Cab                | <input type="checkbox"/> 3/4 Ton | <input type="checkbox"/> 3 Door R-Side             | <input type="checkbox"/> 12 Passenger | <input type="checkbox"/> 4 Cylinder  |
| <input type="checkbox"/> Pickup Truck     | <input type="checkbox"/> Extended Cab               | <input type="checkbox"/> 1 Ton   | <input type="checkbox"/> 4 Door                    | <input type="checkbox"/> 15 Passenger | <input type="checkbox"/> 6 Cylinder  |
| <input type="checkbox"/> Cab & Chassis    | <input type="checkbox"/> Crew Cab                   | <input type="checkbox"/> Class 6 | <input type="checkbox"/> Utility Body <sup>^</sup> | <input type="checkbox"/> Sliding Door | <input type="checkbox"/> 8 Cylinder  |
| <input type="checkbox"/> Van              | <input type="checkbox"/> 2 Wheel Drive              | <input type="checkbox"/> Class 7 | <input type="checkbox"/> Flat Bed <sup>^</sup>     | <input type="checkbox"/> Swing Door   | <input type="checkbox"/> 10 Cylinder |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> 4 Wheel Drive <sup>^</sup> | <input type="checkbox"/> Class 8 | <input type="checkbox"/> Dump Truck <sup>^</sup>   | <input type="checkbox"/> Single RW    | <input type="checkbox"/> Dual RW     |

Additional description for vehicles or equipment: BATWING MOWER - HYDRO 15, ROTARY

<sup>^</sup> Please provide detailed justification on separate sheet.

5. WHAT, IF ANY, SPECIAL OPTIONS OR ACCESSORIES ARE REQUIRED? Please check all appropriate options below and list any additional options on the lines below: i.e. lift gates, 50' telescopic boom, emergency lighting package, light-bar, 60" hydraulic rotary mower, etc. Please attach brochures if applicable:

ALL COUNTY VEHICLES ARE ORDERED WITH FOLLOWING STANDARD OPTIONS: Air Conditioning, AM/FM Radio, Automatic Transmission, Rear Anti-Lock Brakes.

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> AM/FM/Cassette           | <input type="checkbox"/> Bed-Liner      | <input type="checkbox"/> Limited Slip    | <input type="checkbox"/> Trailer Hitch Receiver |
| <input type="checkbox"/> Arrow Board <sup>^</sup> | <input type="checkbox"/> Strobe Light   | <input type="checkbox"/> Power Win/Locks | <input type="checkbox"/> Tires - All Terrain    |
| <input type="checkbox"/> Long Bed                 | <input type="checkbox"/> Floor - Carpet | <input type="checkbox"/> Seats - Cloth   | <input type="checkbox"/> Tow Package            |
| <input type="checkbox"/> Short Bed                | <input type="checkbox"/> Floor - Rubber | <input type="checkbox"/> Seats - Vinyl   | <input type="checkbox"/> Windows - Tinted       |

N/A

6. WHAT WILL BE THE PRIMARY USE OF THE NEW EQUIPMENT OR VEHICLE? ROADSIDE MOWING ALONG LEE COUNTY RIGHT OF WAYS

<sup>^</sup> Specify Dimensions or Model \_\_\_\_\_

KS

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

7. FUNDING SOURCE:

Vehicle Replacement Fund

Capital. Please Specify Account String PC 54101 17500 506430

Other, Please Specify Account String \_\_\_\_\_

If needed, please provide additional account strings: \_\_\_\_\_

8. WE ARE AUTHORIZING A PURCHASE NOT TO EXCEED: \$ 16,500.00 ~~\$25,000~~ MU

*OK per attached file Bobby F.*

|  |                           |   |                         |
|--|---------------------------|---|-------------------------|
| <u>Bobby L Faust</u><br>REQUESTED BY                 | <u>10/21/02</u><br>DATE   | _____<br>1 <sup>ST</sup> LEVEL APPROVAL       | _____<br>DATE           |
| <u>D.V. Chiles</u><br>2 <sup>ND</sup> LEVEL APPROVAL | <u>10.21.2002</u><br>DATE | <u>R. X. [Signature]</u><br>DIVISION DIRECTOR | <u>10/25/02</u><br>DATE |

Option 1:  QUOTES AND REQUISITION. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to issue a requisition using the account string(s) provided above.

Option 2:  VEHICLE REPLACEMENT FUND PURCHASES. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to purchase the equipment or vehicle using motor pool funds (formerly known as surcharge funds).

|   |                         |
|---|-------------------------|
| <u>[Signature]</u><br>DEPARTMENT DIRECTOR         | <u>10/28/02</u><br>DATE |
| <u>[Signature]</u><br>* COUNTY MANAGER / DESIGNEE | <u>10.29.02</u><br>DATE |

\* REQUIRED FOR ALL PURCHASES BETWEEN \$ 25,000 - \$50,000.

**SUBMIT THIS COMPLETED FORM TO FLEET MANAGEMENT**

|   |                                      |  |                         |
|---|--------------------------------------|--|-------------------------|
| <input checked="" type="checkbox"/> RECOMMENDED | <input type="checkbox"/> IN.R.A.T.T. | <u>Donat C. Lawler</u><br>FLEET ACQUISITION SPECIALIST | <u>11.13.02</u><br>DATE |
| <input checked="" type="checkbox"/> APPROVED    | <input type="checkbox"/> DECLINED    | <u>Marilyn Rawls</u><br>FLEET MANAGER                  | <u>11/14/02</u><br>DATE |

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

1. DEPARTMENT/DIVISION: (name) D.O.T / OPERATIONS  
(number) \_\_\_\_\_

2. REQUESTED BY: (print) JONATHAN D. JOSEPH SR PHONE #: 694-3334 X 370

3. IS THIS A REPLACEMENT EQUIPMENT OR VEHICLE ?  YES |  NO

If yes: Asset #: 031935 Yr: 1998 Make: ALAMO Model: HYDRO-15 Meter: N/A

4. WHAT TYPE OF EQUIPMENT OR VEHICLE ARE YOU REQUESTING?

Select all appropriate boxes:

- |   |   |                                  |  |                                       |                                      |
|---|---|----------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sedan            | <input type="checkbox"/> Mid-Size                   | <input type="checkbox"/> 1/4 Ton | <input type="checkbox"/> 2 Door                    | <input type="checkbox"/> Cargo        | <input type="checkbox"/> Gasoline    |
| <input type="checkbox"/> Station Wagon    | <input type="checkbox"/> Full-Size                  | <input type="checkbox"/> 1/2 Ton | <input type="checkbox"/> 3 Door L-Side             | <input type="checkbox"/> 7 Passenger  | <input type="checkbox"/> Diesel      |
| <input type="checkbox"/> Sport Util Veh   | <input type="checkbox"/> Regular Cab                | <input type="checkbox"/> 3/4 Ton | <input type="checkbox"/> 3 Door R-Side             | <input type="checkbox"/> 12 Passenger | <input type="checkbox"/> 4 Cylinder  |
| <input type="checkbox"/> Pickup Truck     | <input type="checkbox"/> Extended Cab               | <input type="checkbox"/> 1 Ton   | <input type="checkbox"/> 4 Door                    | <input type="checkbox"/> 15 Passenger | <input type="checkbox"/> 6 Cylinder  |
| <input type="checkbox"/> Cab & Chassis    | <input type="checkbox"/> Crew Cab                   | <input type="checkbox"/> Class 6 | <input type="checkbox"/> Utility Body <sup>^</sup> | <input type="checkbox"/> Sliding Door | <input type="checkbox"/> 8 Cylinder  |
| <input type="checkbox"/> Van              | <input type="checkbox"/> 2 Wheel Drive              | <input type="checkbox"/> Class 7 | <input type="checkbox"/> Flat Bed <sup>^</sup>     | <input type="checkbox"/> Swing Door   | <input type="checkbox"/> 10 Cylinder |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> 4 Wheel Drive <sup>^</sup> | <input type="checkbox"/> Class 8 | <input type="checkbox"/> Dump Truck <sup>^</sup>   | <input type="checkbox"/> Single RW    | <input type="checkbox"/> Dual RW     |

Additional description for vehicles or equipment: BATWING MOWER-HYDRO 15, ROTARY

<sup>^</sup> Please provide detailed justification on separate sheet.

5. WHAT, IF ANY, SPECIAL OPTIONS OR ACCESSORIES ARE REQUIRED? Please check all appropriate options below and list any additional options on the lines below: i.e. lift gates, 50' telescopic boom, emergency lighting package, light-bar, 60" hydraulic rotary mower, etc. Please attach brochures if applicable:

ALL COUNTY VEHICLES ARE ORDERED WITH FOLLOWING STANDARD OPTIONS: Air Conditioning, AM/FM Radio, Automatic Transmission, Rear Anti-Lock Brakes.

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> AM/FM/Cassette           | <input type="checkbox"/> Bed-Liner      | <input type="checkbox"/> Limited Slip    | <input type="checkbox"/> Trailer Hitch Receiver |
| <input type="checkbox"/> Arrow Board <sup>^</sup> | <input type="checkbox"/> Strobe Light   | <input type="checkbox"/> Power Win/Locks | <input type="checkbox"/> Tires - All Terrain    |
| <input type="checkbox"/> Long Bed                 | <input type="checkbox"/> Floor - Carpet | <input type="checkbox"/> Seats - Cloth   | <input type="checkbox"/> Tow Package            |
| <input type="checkbox"/> Short Bed                | <input type="checkbox"/> Floor - Rubber | <input type="checkbox"/> Seats - Vinyl   | <input type="checkbox"/> Windows - Tinted       |

6. WHAT WILL BE THE PRIMARY USE OF THE NEW EQUIPMENT OR VEHICLE? ROADSIDE

MOWING ALONG LEE COUNTY RIGHT OF WAYS

<sup>^</sup> Specify Dimensions or Model \_\_\_\_\_

KS

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

**7. FUNDING SOURCE:**

Vehicle Replacement Fund

Capital. Please Specify Account String

PC 54101 17500 546430

506430 Per Ann P. 11/14

Other. Please Specify Account String \_\_\_\_\_

If needed, please provide additional account strings: \_\_\_\_\_

**8. WE ARE AUTHORIZING A PURCHASE NOT TO EXCEED: \$**

16,500.00

OK for 11/14  
22/04/50 pu

Bobby L Faust  
REQUESTED BY

10/21/02  
DATE

1<sup>ST</sup> LEVEL APPROVAL

DATE

D. V. Ch...  
2<sup>ND</sup> LEVEL APPROVAL

10.21.2002  
DATE

R. F. ...  
DIVISION DIRECTOR

10/25/02  
DATE

Bobby F  
(see attached)

Option 1:  QUOTES AND REQUISITION. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to issue a requisition using the account string(s) provided above.

Option 2:  VEHICLE REPLACEMENT FUND PURCHASES. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to purchase the equipment or vehicle using motor pool funds (formerly known as surcharge funds).

[Signature]  
DEPARTMENT DIRECTOR

12/02/02  
DATE

[Signature]  
\* COUNTY MANAGER / DESIGNEE

10.29.02  
DATE

\* REQUIRED FOR ALL PURCHASES BETWEEN \$ 25,000 - \$50,000.

**SUBMIT THIS COMPLETED FORM TO FLEET MANAGEMENT**

RECOMMENDED  N.R.A.T.T.

Donat C. Lawes  
FLEET ACQUISITION SPECIALIST

11.13.02  
DATE

APPROVED  DECLINED

Marilyn Rawlins  
FLEET MANAGER

11/14/02  
DATE

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

1. DEPARTMENT/DIVISION: (name) D.O.T / OPERATIONS  
(number) \_\_\_\_\_
2. REQUESTED BY: (print) JONATHAN D. JOSEPH SR PHONE #: 694-3334 X.370
3. IS THIS A REPLACEMENT EQUIPMENT OR VEHICLE?  YES  NO  
If yes: Asset #: 031936 Yr: 1988 Make: ALAMO Model: HYDRO-155 Meter: N/A
4. WHAT TYPE OF EQUIPMENT OR VEHICLE ARE YOU REQUESTING?

Select all appropriate boxes:

- |   |  |                                  |  |                                       |                                      |
|---|--|----------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sedan            | <input type="checkbox"/> Mid-Size                    | <input type="checkbox"/> 1/4 Ton | <input type="checkbox"/> 2 Door                    | <input type="checkbox"/> Cargo        | <input type="checkbox"/> Gasoline    |
| <input type="checkbox"/> Station Wagon    | <input type="checkbox"/> Full-Size                   | <input type="checkbox"/> 1/2 Ton | <input type="checkbox"/> 3 Door L-Side             | <input type="checkbox"/> 7 Passenger  | <input type="checkbox"/> Diesel      |
| <input type="checkbox"/> Sport Util Veh   | <input type="checkbox"/> Regular Cab                 | <input type="checkbox"/> 3/4 Ton | <input type="checkbox"/> 3 Door R-Side             | <input type="checkbox"/> 12 Passenger | <input type="checkbox"/> 4 Cylinder  |
| <input type="checkbox"/> Pickup Truck     | <input type="checkbox"/> Extended Cab                | <input type="checkbox"/> 1 Ton   | <input type="checkbox"/> 4 Door                    | <input type="checkbox"/> 15 Passenger | <input type="checkbox"/> 6 Cylinder  |
| <input type="checkbox"/> Cab & Chassis    | <input type="checkbox"/> Crew Cab                    | <input type="checkbox"/> Class 6 | <input type="checkbox"/> Utility Body <sup>^</sup> | <input type="checkbox"/> Sliding Door | <input type="checkbox"/> 8 Cylinder  |
| <input type="checkbox"/> Van              | <input type="checkbox"/> 2 Wheel Drive               | <input type="checkbox"/> Class 7 | <input type="checkbox"/> Flat Bed <sup>^</sup>     | <input type="checkbox"/> Swing Door   | <input type="checkbox"/> 10 Cylinder |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> 4 Wheel Drive <sup>''</sup> | <input type="checkbox"/> Class 8 | <input type="checkbox"/> Dump Truck <sup>^</sup>   | <input type="checkbox"/> Single RW    | <input type="checkbox"/> Dual RW     |

Additional description for vehicles or equipment: BATWING MOWER-HYDRO155, ROTARY

<sup>''</sup> Please provide detailed justification on separate sheet.

5. WHAT, IF ANY, SPECIAL OPTIONS OR ACCESSORIES ARE REQUIRED? Please check all appropriate options below and list any additional options on the lines below: i.e. lift gates, 50' telescopic boom, emergency lighting package, light-bar, 60" hydraulic rotary mower, etc. Please attach brochures if applicable:

ALL COUNTY VEHICLES ARE ORDERED WITH FOLLOWING STANDARD OPTIONS: Air Conditioning, AM/FM Radio, Automatic Transmission, Rear Anti-Lock Brakes.

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> AM/FM/Cassette           | <input type="checkbox"/> Bed-Liner      | <input type="checkbox"/> Limited Slip    | <input type="checkbox"/> Trailer Hitch Receiver |
| <input type="checkbox"/> Arrow Board <sup>^</sup> | <input type="checkbox"/> Strobe Light   | <input type="checkbox"/> Power Win/Locks | <input type="checkbox"/> Tires - All Terrain    |
| <input type="checkbox"/> Long Bed                 | <input type="checkbox"/> Floor - Carpet | <input type="checkbox"/> Seats - Cloth   | <input type="checkbox"/> Tow Package            |
| <input type="checkbox"/> Short Bed                | <input type="checkbox"/> Floor - Rubber | <input type="checkbox"/> Seats - Vinyl   | <input type="checkbox"/> Windows - Tinted       |

6. WHAT WILL BE THE PRIMARY USE OF THE NEW EQUIPMENT OR VEHICLE? ROADSIDE  
MOWING ALONG LEE COUNTY RIGHT OF WAYS

<sup>^</sup> Specify Dimensions or Model \_\_\_\_\_

KS



**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM  
(PLEASE PRINT OR TYPE)**

**7. FUNDING SOURCE:**

Vehicle Replacement Fund

Capital. Please Specify Account String

PC 54101 17500 546430

506430 Per Ann P  
11/14/02

Other, Please Specify Account String \_\_\_\_\_

If needed, please provide additional account strings: \_\_\_\_\_

8. WE ARE AUTHORIZING A PURCHASE NOT TO EXCEED: \$

16,500.00 OK for \$22,400

per Bobbey,  
Attached,  
11/14/02

Bobby L Faust  
REQUESTED BY

10/21/02  
DATE

1<sup>ST</sup> LEVEL APPROVAL

DATE

Oldy. Allen  
2<sup>ND</sup> LEVEL APPROVAL

10-27-2002  
DATE

R. X. Legal  
DIVISION DIRECTOR

10/25/02  
DATE

Option 1:  QUOTES AND REQUISITION. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to issue a requisition using the account string(s) provided above.

Option 2:  VEHICLE REPLACEMENT FUND PURCHASES. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to purchase the equipment or vehicle using motor pool funds (formerly known as surcharge funds).

[Signature] 10/25/02  
DEPARTMENT DIRECTOR DATE

[Signature] 10-29-02  
\* COUNTY MANAGER / DESIGNER DATE

\* REQUIRED FOR ALL PURCHASES BETWEEN \$ 25,000 - \$50,000.

**SUBMIT THIS COMPLETED FORM TO FLEET MANAGEMENT**

RECOMMENDED  N.R.A.T.T.

[Signature]  
FLEET ACQUISITION SPECIALIST

11-13-02  
DATE

APPROVED  DECLINED

[Signature]  
FLEET MANAGER

11/14/02  
DATE

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

1. DEPARTMENT/DIVISION: (name) D.O.T / OPERATIONS  
(number) \_\_\_\_\_

2. REQUESTED BY: (print) JONATHAN D. JOSEPH SR PHONE #: 694-3334 X.370

3. IS THIS A REPLACEMENT EQUIPMENT OR VEHICLE ?  YES |  NO  
If yes: Asset #: 031937 Yr: 1998 Make: ALAMO Model: HYDRO-155 Meter: N/A

4. WHAT TYPE OF EQUIPMENT OR VEHICLE ARE YOU REQUESTING?

Select all appropriate boxes:

- |   |   |                                  |  |                                       |                                      |
|---|---|----------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sedan            | <input type="checkbox"/> Mid-Size                   | <input type="checkbox"/> ¼ Ton   | <input type="checkbox"/> 2 Door                    | <input type="checkbox"/> Cargo        | <input type="checkbox"/> Gasoline    |
| <input type="checkbox"/> Station Wagon    | <input type="checkbox"/> Full-Size                  | <input type="checkbox"/> ½ Ton   | <input type="checkbox"/> 3 Door L-Side             | <input type="checkbox"/> 7 Passenger  | <input type="checkbox"/> Diesel      |
| <input type="checkbox"/> Sport Util Veh   | <input type="checkbox"/> Regular Cab                | <input type="checkbox"/> ¾ Ton   | <input type="checkbox"/> 3 Door R-Side             | <input type="checkbox"/> 12 Passenger | <input type="checkbox"/> 4 Cylinder  |
| <input type="checkbox"/> Pickup Truck     | <input type="checkbox"/> Extended Cab               | <input type="checkbox"/> 1 Ton   | <input type="checkbox"/> 4 Door                    | <input type="checkbox"/> 15 Passenger | <input type="checkbox"/> 6 Cylinder  |
| <input type="checkbox"/> Cab & Chassis    | <input type="checkbox"/> Crew Cab                   | <input type="checkbox"/> Class 6 | <input type="checkbox"/> Utility Body <sup>^</sup> | <input type="checkbox"/> Sliding Door | <input type="checkbox"/> 8 Cylinder  |
| <input type="checkbox"/> Van              | <input type="checkbox"/> 2 Wheel Drive              | <input type="checkbox"/> Class 7 | <input type="checkbox"/> Flat Bed <sup>^</sup>     | <input type="checkbox"/> Swing Door   | <input type="checkbox"/> 10 Cylinder |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> 4 Wheel Drive <sup>^</sup> | <input type="checkbox"/> Class 8 | <input type="checkbox"/> Dump Truck <sup>^</sup>   | <input type="checkbox"/> Single RW    | <input type="checkbox"/> Dual RW     |

Additional description for vehicles or equipment: BATWING MOWER-HYDRO 15, ROTARY

<sup>^</sup> Please provide detailed justification on separate sheet.

5. WHAT, IF ANY, SPECIAL OPTIONS OR ACCESSORIES ARE REQUIRED? Please check all appropriate options below and list any additional options on the lines below: i.e. lift gates, 50' telescopic boom, emergency lighting package, light-bar, 60" hydraulic rotary mower, etc. Please attach brochures if applicable:

ALL COUNTY VEHICLES ARE ORDERED WITH FOLLOWING STANDARD OPTIONS: Air Conditioning, AM/FM Radio, Automatic Transmission, Rear Anti-Lock Brakes,

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> AM/FM/Cassette           | <input type="checkbox"/> Bed-Liner      | <input type="checkbox"/> Limited Slip    | <input type="checkbox"/> Trailer Hitch Receiver |
| <input type="checkbox"/> Arrow Board <sup>^</sup> | <input type="checkbox"/> Strobe Light   | <input type="checkbox"/> Power Win/Locks | <input type="checkbox"/> Tires - All Terrain    |
| <input type="checkbox"/> Long Bed                 | <input type="checkbox"/> Floor - Carpet | <input type="checkbox"/> Seats - Cloth   | <input type="checkbox"/> Tow Package            |
| <input type="checkbox"/> Short Bed                | <input type="checkbox"/> Floor - Rubber | <input type="checkbox"/> Seats - Vinyl   | <input type="checkbox"/> Windows - Tinted       |

N/A

6. WHAT WILL BE THE PRIMARY USE OF THE NEW EQUIPMENT OR VEHICLE? ROADSIDE MOWING ALONG LEE COUNTY RIGHT OF WAYS

<sup>^</sup> Specify Dimensions or Model \_\_\_\_\_

KS

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM  
(PLEASE PRINT OR TYPE)**

**7. FUNDING SOURCE:**

Vehicle Replacement Fund

Capital. Please Specify Account String

PC 54101 17500 546430

506430 Per Ann P. 11/14/02

Other. Please Specify Account String \_\_\_\_\_

If needed, please provide additional account strings: \_\_\_\_\_

ok for 10/14/02

**8. WE ARE AUTHORIZING A PURCHASE NOT TO EXCEED: \$** 16,500.00

\$22,406.50 per Bobby Faust

Bobby Faust  
REQUESTED BY

10/21/02  
DATE

1<sup>ST</sup> LEVEL APPROVAL

DATE

D. V. Chaves

10.21.2002

R. X. [Signature]  
DIVISION DIRECTOR

10/25/02  
DATE

2<sup>ND</sup> LEVEL APPROVAL

DATE

Option 1:  QUOTES AND REQUISITION. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to issue a requisition using the account string(s) provided above.

Option 2:  VEHICLE REPLACEMENT FUND PURCHASES. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to purchase the equipment or vehicle using motor pool funds (formerly known as surcharge funds).

[Signature] 10/28/02  
DEPARTMENT DIRECTOR DATE

[Signature] 10.29.02  
\* COUNTY MANAGER / DESIGNEE DATE

\* REQUIRED FOR ALL PURCHASES BETWEEN \$ 25,000 - \$50,000.

**SUBMIT THIS COMPLETED FORM TO FLEET MANAGEMENT**

RECOMMENDED  N.R.A.T.T.

Jonathan Chaves  
FLEET ACQUISITION SPECIALIST

11.13.02  
DATE

APPROVED  DECLINED

Marilyn Hawley  
FLEET MANAGER

11/14/02  
DATE

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

1. DEPARTMENT/DIVISION: (name) DOT / Operation  
(number) 54916

2. REQUESTED BY: (print) Jim Hass PHONE #: 694-3334

3. IS THIS A REPLACEMENT EQUIPMENT OR VEHICLE ?  YES [ ] NO

If yes: Asset #: 31883 Yr: 96 Make: ALAMO Model: Hydro 15<sup>4</sup> Meter: N/A

4. WHAT TYPE OF EQUIPMENT OR VEHICLE ARE YOU REQUESTING?

Select all appropriate boxes:

- |   |   |                                  |  |                                       |                                      |
|---|---|----------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sedan            | <input type="checkbox"/> Mid-Size                   | <input type="checkbox"/> ¼ Ton   | <input type="checkbox"/> 2 Door                    | <input type="checkbox"/> Cargo        | <input type="checkbox"/> Gasoline    |
| <input type="checkbox"/> Station Wagon    | <input type="checkbox"/> Full-Size                  | <input type="checkbox"/> ½ Ton   | <input type="checkbox"/> 3 Door L-Side             | <input type="checkbox"/> 7 Passenger  | <input type="checkbox"/> Diesel      |
| <input type="checkbox"/> Sport Util Veh   | <input type="checkbox"/> Regular Cab                | <input type="checkbox"/> ¾ Ton   | <input type="checkbox"/> 3 Door R-Side             | <input type="checkbox"/> 12 Passenger | <input type="checkbox"/> 4 Cylinder  |
| <input type="checkbox"/> Pickup Truck     | <input type="checkbox"/> Extended Cab               | <input type="checkbox"/> 1 Ton   | <input type="checkbox"/> 4 Door                    | <input type="checkbox"/> 15 Passenger | <input type="checkbox"/> 6 Cylinder  |
| <input type="checkbox"/> Cab & Chassis    | <input type="checkbox"/> Crew Cab                   | <input type="checkbox"/> Class 6 | <input type="checkbox"/> Utility Body <sup>A</sup> | <input type="checkbox"/> Sliding Door | <input type="checkbox"/> 8 Cylinder  |
| <input type="checkbox"/> Van              | <input type="checkbox"/> 2 Wheel Drive              | <input type="checkbox"/> Class 7 | <input type="checkbox"/> Flat Bed <sup>A</sup>     | <input type="checkbox"/> Swing Door   | <input type="checkbox"/> 10 Cylinder |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> 4 Wheel Drive <sup>B</sup> | <input type="checkbox"/> Class 8 | <input type="checkbox"/> Dump Truck <sup>A</sup>   | <input type="checkbox"/> Single RW    | <input type="checkbox"/> Dual RW     |

Additional description for vehicles or equipment: 15' hydro mower

<sup>B</sup> Please provide detailed justification on separate sheet.

5. WHAT, IF ANY, SPECIAL OPTIONS OR ACCESSORIES ARE REQUIRED? Please check all appropriate options below and list any additional options on the lines below: i.e. lift gates, 50' telescopic boom, emergency lighting package, light-bar, 60" hydraulic rotary mower, etc. Please attach brochures if applicable:

ALL COUNTY VEHICLES ARE ORDERED WITH FOLLOWING STANDARD OPTIONS: Air Conditioning, AM/FM Radio, Automatic Transmission, Rear Anti-Lock Brakes.

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> AM/FM/Cassette           | <input type="checkbox"/> Eud-Liner      | <input type="checkbox"/> Limited Slip    | <input type="checkbox"/> Trailer Hitch Receiver |
| <input type="checkbox"/> Arrow Board <sup>A</sup> | <input type="checkbox"/> Strobe Light   | <input type="checkbox"/> Power Win/Locks | <input type="checkbox"/> Tires - All Terrain    |
| <input type="checkbox"/> Long Bed                 | <input type="checkbox"/> Floor - Carpet | <input type="checkbox"/> Seats - Cloth   | <input type="checkbox"/> Tow Package            |
| <input type="checkbox"/> Short Bed                | <input type="checkbox"/> Floor - Rubber | <input type="checkbox"/> Seats - Vinyl   | <input type="checkbox"/> Windows - Tinted       |

6. WHAT WILL BE THE PRIMARY USE OF THE NEW EQUIPMENT OR VEHICLE? To mow high visible roadways

<sup>A</sup> Specify Dimensions or Model \_\_\_\_\_

**LEE COUNTY GOVERNMENT, DIVISION OF FLEET MANAGEMENT  
EQUIPMENT AND VEHICLE REQUEST FORM**  
(PLEASE PRINT OR TYPE)

7. FUNDING SOURCE:

Vehicle Replacement Fund

Capital, Please Specify Account String PC 54101 17500 546430 506430 Per Ann P.  
11/14/02

Other, Please Specify Account String \_\_\_\_\_

If needed, please provide additional account strings: \_\_\_\_\_

8. WE ARE AUTHORIZING A PURCHASE NOT TO EXCEED: \$ 15,000.00 #22,406.50  
(see attached  
per Bobby F.  
11/14/02)

|   |                           |                                       |                         |
|---|---------------------------|---------------------------------------|-------------------------|
| <u>Bobby L. Fausel</u><br>REQUESTED BY                | <u>10/22/02</u><br>DATE   | _____                                 | _____                   |
| _____   | _____                     | 1 <sup>ST</sup> LEVEL APPROVAL        | DATE                    |
| <u>D.D.V. Churn</u><br>2 <sup>ND</sup> LEVEL APPROVAL | <u>10-22-2002</u><br>DATE | <u>R. L. ...</u><br>DIVISION DIRECTOR | <u>10/25/02</u><br>DATE |

Option 1:  QUOTES AND REQUISITION. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to issue a requisition using the account string(s) provided above.

Option 2:  VEHICLE REPLACEMENT FUND PURCHASES. This option authorizes Fleet Management to obtain quotes and authorizes Fleet Management to purchase the equipment or vehicle using motor pool funds (formerly known as surcharge funds).

[Signature]  
DEPARTMENT DIRECTOR 12/28/02  
DATE

[Signature]  
\* COUNTY MANAGER / DESIGNEE 10.29.02  
DATE

\* REQUIRED FOR ALL PURCHASES BETWEEN \$ 25,000 - \$50,000.

**SUBMIT THIS COMPLETED FORM TO FLEET MANAGEMENT**

RECOMMENDED  N.R.A.T.T. Joat C. Lawls 11.14.02  
FLEET ACQUISITION SPECIALIST DATE

APPROVED  DECLINED Marilyn ... 11/14/02  
FLEET MANAGER DATE

# ATTACHMENT #2



NEW HOLLAND

**GAITHERSBURG EQUIPMENT COMPANY**  
 700 East Diamond Avenue • Gaithersburg, MD 20877  
 (301) 670-9300 • FAX (301) 926-3705  
 1-800-734-8508



## PROPOSAL

TO : LEE COUNTY  
ATTN: DON

PHONE : \_\_\_\_\_  
 FAX: 239-338-3234

| QTY                                   | DESCRIPTION  | UNIT PRICE  | TOTAL PRICE |
|---------------------------------------|--|-------------|-------------|
| 5                                     | ALAMO HYDRO 15 - HY154 \$21282.00 - 11.5%=\$18834  | \$94,170.00 | \$94,170.00 |
| 5                                     | #02 RECAP TIRES AIRPLANE (6 EA.) \$1813-11.5%=1604 | \$8,020.00  | \$8,020.00  |
| 5                                     | N. HOLLAND TS MOUNT KITS                           | N/C         |             |
| 5                                     | #00769512 WING MOTOR CUTOFF \$2224- 11.5%=\$1968   | \$9,840.00  | \$9,840.00  |
| BASED ON FEDERAL GSA PRICING SCHEDULE |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |
|                                       |  |             |             |

DESCRIBE TRADE-IN

|         |       |
|---------|-------|
| MAKE :  | _____ |
| MODEL : | _____ |
| YEAR :  | _____ |
| S/N :   | _____ |

|           |                       |
|-----------|-----------------------|
| SUBTOTAL  | \$112,032.00          |
| TAX       | \$0.00                |
| TOTAL     | <u>\$112,032.00</u> * |
| TRADE-IN  | N/A                   |
| NET PRICE | #VALUE!               |

-PRICE SUBJECT TO CHANGE WITHOUT NOTICE -

JIMMY JACOBS, JR. *[Signature]*  
 Authorized By

Date 12/6/02

\* Vendor used round numbers - the correct total w/ the 11.5% discount is \$112,032.50.

- RJE  
 12-9-02

lee co fleet mgmt



# HYDRO 15

## Flex-Wing Rotary Mower

### STANDARD SPECIFICATIONS

Prices Effective January 15, 2002

- 15' Cutting Width
- Self-Leveling Clevis Hitch
- Box Angle Frame
- 10-Gauge Top Deck
- 1/4" x 11-1/4" Side Skirts
- Dual Level Lift Rods
- 35-Gallon Reservoir with Dual Filtration
- 145 HP Dual Stage Gear-Type Pump
- Wing Hydraulic Motors Rated @ 58 HP @ 1500 PSI
- Center Hydraulic Motor Rated @ 63 HP @ 2500 PSI
- Double Row Chainguards
- Rubber Cushioned Axles
- Hydraulically Folding Wings
- Pan or Bar Blade Carrier
- Updraft Blades
- Replaceable Skid Shoes
- Safety Tow Chain
- Parking Jack

| PRODUCT ORDER CODE   | DESCRIPTION                                     | APPRX. WEIGHT | NET | LIST PRICE |
|--|---|---------------|-----|------------|
|  | <b>HYDRO 15 BASE UNIT (One Choice Required)</b> |               |     |            |
| HY151  | HYDRO 15, Bar, Manual Wing Height Adjustment    | 4100          |     | 20,055     |
| HY152  | HYDRO 15, Pan, Manual Wing Height Adjustment    | 4200          |     | 20,727     |
| HY153  | HYDRO 15, Bar, Level Lift Kit                   | 4100          |     | 20,693     |
| HY154  | HYDRO 15, Pan, Level Lift Kit                   | 4200          |     | 21,282     |
|  | <b>WHEELS &amp; TIRES (One Choice Required)</b> |               |     |            |
| 01   | Six Implement Tires (6.70-15 6 Ply)             | 460           |     | 827        |
| 02   | Six Recapped Airplane Tires (22 Ply)            | 468           |     | 1,813      |
| 03   | Six 15" Wheels (Wheels Only)                    | 128           |     | 261        |
| 04   | Six Laminated Tires and Wheels                  | 450           |     | 1,123      |
|  | <b>MOUNT KIT (One Choice Required)</b>          |               |     |            |
| 01   | Case/IH 1390, 1490, 1690, 1394, 1494, 1594      | 15            |     | N/C        |
| 02   | Case/IH 784, 785, 884, 885, 895 & 995           | 15            |     | N/C        |
| 03   | NH 5610, 6610, 7610, 7710 & 5640, 6640, 7740    | 15            |     | N/C        |
| 04   | NH 4610 & 540A                                  | 15            |     | N/C        |
| 05   | International Hydro 84 & Hydro 85               | 15            |     | N/C        |
| 06   | International 584, 585, 684 & 685               | 15            |     | N/C        |
| 07   | John Deere 401, 2640, & 2950                    | 15            |     | N/C        |
| 08   | John Deere 6200, 6300, & 6400                   | 15            |     | N/C        |
| 09   | Massey Ferguson 383-390                         | 15            |     | N/C        |
| 10   | Universal (Dealer Must Modify)                  | 15            |     | N/C        |
| Please call ALAMO Customer Service at (800)356-6286 if your tractor mount kit is not listed above. |   |               |     |            |
|  | <b>OPTIONS</b>                                  |               |     |            |
| 00756179   | Additional Operators and Parts Manual           |               |     | 32         |
| 00769512   | Wing Motor Cutoff Option                        | 205           |     | 2,224      |
| 00612100   | Tractor to Valve Hose Kit                       | 6             |     | 94         |
| 00380200   | 3-Spool Valve (Open Center)                     | 40            |     | 474        |
| 00759833   | 3-Spool Valve (Closed Center)                   | 40            |     | 470        |
| 00754019   | Winch Kit                                       | 15            |     | 192        |
| 00758924   | Captive Ball Hitch Tongue                       | 0             |     | 155        |
| 00758925   | Pintle Hitch Tongue Kit                         | 0             |     | 389        |
| 00751008   | 3" Reflector Kit                                | 1             |     | 43         |
| 00750608   | Blade Wrench                                    | 2             |     | 96         |
| 00762095   | Kit Cable & Clamp                               | 15            |     | 106        |
| 00753234   | Stroke Control Segments                         | 3             |     | 55         |

PRICING CONTINUED ON NEXT PAGE

HS-75

**Gaithersburg Equipment Company  
GSA Contracts**

**Volume 1**

700 East Diamond Avenue, Gaithersburg, Maryland 20877  
Phone-301-670-9300 Fax-301-926-3705  
E-Mail - [www.kubota@erols.com](mailto:www.kubota@erols.com)

Contact: Jimmy Jacobs



COVER PAGE

AUTHORIZED FEDERAL SUPPLY SCHEDULE PRICE LIST  
FSC GROUP 23 PART V

VEHICULAR MULTIPLE AWARD SCHEDULE (VMAS)

CONTRACT PERIOD: 8/14/00 TO 8/13/05

ONE FIVE YEAR OPTION

GSA ADVANTAGE ON LINE ACCESS : <http://www.fss.gsa.gov>

SCHEDULE GS30F-0011K: #271-102 SNOW MAINTENANCE EQUIPMENT -  
HENDERSON MFG.

# 271-105 WOODCHIPPING/SHREDDERS, STUMP REMOVAL  
AND TUB GRINDERS - DURATECH

SCHEDULE GS30F-0010K

#271-101 CONSTRUCTION EQUIPMENT - KUBOTA, NEW  
HOLLAND, ALAMO, LANDPRIDE, BRADCO, GLENMAC/HARLE

#272-101 ATTACHMENTS, CONSTRUCTION EQUIPMENT

GAITHERSBURG FARMERS SUPPLY, INC.

T/A: GAITHERSBURG EQUIPMENT COMPANY

700 EAST DIAMOND AVE.

GAITHERSBURG, MARYLAND 20877

PHONE NUMBER: 301-670-9300

FAX NUMBER: 301-926-3705

EMAIL: KUBOTA@EROLS.COM

WEB PAGE: WWW.GSASALES.COM

FED. ID 52-056-7012

D&B 022595490

CAGE CODE ON8G1



**U.S. GENERAL SERVICES ADMINISTRATION**  
Northeast and Caribbean Region  
Federal Supply Service  
Contract Management Division

8/22/2000

James W. Jacobs, Jr.  
Gaithersburg Farmers Supply, I  
700 E. Diamond Ave  
Gaithersburg, MD 20877

**SUBJECT: New Multiple Award Schedule Contract GS-30F-00110K**

Dear Mr. Jacobs:

On August 14, 2000, Gaithersburg Farmers Supply, I was awarded General Services Administration (GSA) Contract GS-30F-00110K, which includes clauses pertaining to the submission of Sales Data and the Industrial Funding Fee (IFF) under the contract. These clauses require that you report to GSA, on a quarterly basis, the dollar value of Sales under the contract and submit any resulting IFF. Specifically, the Sales reports and resulting IFF are due within 30 days following the end of each standard business quarter (January - March, April - June, July - September, and October - December). Your report and payment will be considered delinquent if submitted after the 30<sup>th</sup> day.

Sales are to be submitted electronically, via the Internet, to GSA's Vendor Support Center (VSC) Website (<http://72a.fss.gsa.gov>). In order to comply with this reporting requirement, you must register your contract and receive a password that will enable you to access this website.

Registration and issuance of the password is handled exclusively by Vendor Support Center personnel. You can contact them by telephone at (703) 305-6235; by FAX at (703) 305-7944 or you can register via their website (<http://72a.fss.gsa.gov>). This web address will bring you to the VSC home page. Once there, go to the top of the page and click on "Support Center". You will then see a button for "Registration". When you click on that button, it will bring up a registration form and display the required information necessary for you to complete your registration.

As soon as you report sales, a check for the Industrial Funding Fee (1% of contract sales) should be issued. This check should be made payable and remitted to:

General Services Administration  
Accounts Receivable Branch (6BCR)  
P.O. Box 70500  
Chicago, IL 60673-0500

Thomas P. O'Neill, Jr. Federal Building, Room 947, 10 Causeway Street, Boston, MA 02222

MEMORANDUM  
FROM  
THE DIVISION OF PURCHASING

*JS*  
10/13/02

DATE: DECEMBER 9, 2002

TO: MARILYN RAWLINGS  
FLEET MANAGER

*Janet Sheehan*  
FROM: JANET SHEEHAN, CPPB  
PURCHASING DIRECTOR

RE: BLUE SHEET # 20021416

PROJECT: Five (5) Alamo Hydro-15 Rotary Mowers

TYPE: GSA Purchase

AWARDED TO: Gaithersburg Equipment Company

Attn. Ms. Rawlings – When you have finished your review of this package, please forward it to Scott Gilbertson, DOT.

*JS*  
*To →* Attn. Mr. Gilbertson - When you have finished your review of this package, please forward it to Kristie Kroslack in the County Attorney's Office.

If there are any questions or concerns with this package, please contact Bob Franceschini at 689-7385.

RECEIVED  
DEC 12 2002

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