| G | | Stephen F. A | ustin State Univ | ers | ity | | | | | Page 1 | |
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| fixtures at the entrance adjacent to the reception desk. 3. Install new switches at the existing rough in locations. 4. Install new receptacles at the existing rough in locations. 5. Disconnect and reinstall the existing exit signs and devices in the ceiling grid at the elevator lobby and the student entrance. 6. Install new air grills throughout the work area 7. Scrape, tape, and float the popcorn ceiling texture areas in the public entrance and under the living room mezzanine. 8. Patching and refinishing of water damaged a of the ceilings and plaster walls. | | | | | | | | | |
| Purchaser: L | aDonna OHara | (936) 4684 | 584 | | | IONAL CHARGE | | | |
| | 0081320 emale Woman Ow | | ationsh se Clas | ip: ER ss: Coop - TIPS | G-TAP | | : | CONTINUED | |
| | Warrant Hold process | s runs nightly and terminates | s any ve | endors on hold. \ | rendor | EPLS status veri | | y Purchaser. | |

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| 9. Painting of lower ceilings, walls, and millwork in the work areas. Paint the upstairs railings and stair structure metal work. Paint the high walls including the trim and door frames. Paint the upstairs paneling in the living room. 10. Install new acoustical ceiling tiles and clean/patch the existing ceiling grid. 11. Installation of new laminate at the reception desk and the microwave shelving at the student entrance. Modifying the reception desk to meet AD standards is excluded. 12. Refurbish the finish on the solid core door. 13. Install new laminate at the work stations in the living room. | | A | | | | | | | | |
| Purchaser: L | aDonna OHara | (936) 4684 | 4584 | | | | TIONAL CHARGE | - | | |
| Vendor ID: 1 Req No: R | | Collegiate Employee/Employee Rel | | | ER | DISC | OUNT/TRADE-IN TOTAL | | CONTINUED | |
| Blanket Order: HUB Status: F | emale Woman Ow | | | | oop - TIP | S-TAP | S | | | |
| Vendor | Warrant Hold proces | s runs nightly and terminate | s any ' | vendor | rs on hold. | Vendo | r EPLS status veri | fied by | / Purchaser. | |
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| Procurement and Business Serv Nacogdoches, Texas 75962-303 | | | | PO Date: | 06/05/24 | |
| Supplier: Phone (936) 468-2206 * Fax (936) | | | | Delivery Date: | 07/31/24 | |
| Cox Concrete Contractors, Inc. DBA: CoxJones PO Box 631447 Nacogdoches TX 75963-1447 | | ACCE | PTAN | T OF PURCHA ICE OF DELIV PURCHASE@ | | |
| shelby@coxjones.com | | | | | | |
| Send Billing Invoice to: | Ship | | | im | | |
| Stephen F. Austin State University P.O. Box 6085 Nacogdoches, TX 75962-6085 ATTN: Accounts Payable | | Physical I Physical I 2104 Wils SFA Box | Plant son Dr 13031 | | | |
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| Terms: Net 30 FOB: Installed | | | | R NO. MUST A CUMENTS AND | PPEAR ON ALL INVOICES | |
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| Griffith Hall Scope of Work is limited to the public entrance, elevator lobby, student entrance living room areas of the first floor only. Demo and upgrade the existing recessed fixtures at the entrance adjacent to the recerdesk. Install new switches at the existing rough locations. Install new receptacles at the existing rough locations. Disconnect and reinstall the existing exit signs and devices in the ceiling grid at the elevator lobby and the student entrance. Relocate electrical at the reception desk. | rance, d light eption n in ugh | | | | | |
| N N | 936) 4684584 | | | IONAL CHARGE | | |
| Reg No: R0081320 | Collegiate Licens | | DISC | OUNT/TRADE-IN TOTAL | | |
| HUB Status: Female Woman Owned | Purchase Cla | ss: Coop - TIP | S-TAP | S | | |
| Vendor Warrant Hold process runs nightly and t | terminates any v | vendors on hold. | Vendor | · EPLS status verif | ied by Purchaser. | |
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| Send Billing Invoice to Stephen F. Austin P.O. Box 6085 Nacogdoches, TX ATTN: Accounts F | State University 75962-6085 | Ship to: | 2104 Wils SFA Box | Plant Plant 101 son Dr | |
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| 8. Scrape, ta texture areas living room m 9. Patching a of the ceiling 10. Painting o millwork in th railings and s high walls ino Paint the ups 11. Install ne clean/patch t 12. Retrofit th | air grills throughout the work area be, and float the popcorn ceiling in the public entrance and under the nezzanine. Ind refinishing of water damaged areas and plaster walls. of lower ceilings, walls, and e work areas. Paint the upstairs tair structure metal work. Paint the cluding the trim and door frames. tairs paneling in the living room. w acoustical ceiling tiles and he existing ceiling grid. he reception desk and new doors & stallation of new laminate at the | 5 | | | |
| Purchaser: LaDoni | na OHara (936) 468 | 4584 | | ADDITIONAL CHARGE | |
| Vendor ID: 105025 Req No: R0081 3 Blanket Order: | | e Licensed: elationship: | ER | DISCOUNT/TRADE-IN TOTAL | |
| HUB Status: Female | e Woman Owned Purcha | ase Class: | Coop - TIPS | S-TAPS | |
| Vendor Warra 949060-30220-77343(| nt Hold process runs nightly and terminate | es any veno | tors on hold. | Vendor EPLS status ver | ified by Purchaser. |

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| student ent 13. Steam of public entra lobby. Dem in the living 14. Refurbis 15. Install n the living ro 16. Cleanin EXCLUSIO All work on Rough carp trim and pa | rance. clean the existing once, student entra o and install new room. sh the finish on th ew laminate at the om. g from construction NS: other levels not n pentry and trim can neling; All fire spri | ance, and elevator carpet & rubber base e solid core door. e work stations in on work only. oted here; rpentry at all wood inkler work; | | | | | | | |
| Purchaser: LaDo | | (936) 4684 | | | _ | | | | |
| Vendor ID: 1050 Req No: R008 Blanket Order: HUB Status: Fema | 1320 | Collegiate Employee/Employee Rel ed Purcha | ationship | | | OUNT/TRADE-IN TOTAL | | UED | |
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| acousti grid rep ceiling leaks c reinstal work ar the Ker All work workma protecti and all improve | cal ceiling grid; Colo placement compone grid; Paint of the hig ausing water dama lation of furniture an reas; Owner provide r reception desk to k is to be performed anlike manner, site ion provided to avoi adjoining property, ements, performed | kept clean at all times, d damage to landscaping including as quickly as possible | | | | | | |
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| | Member of The University ocurement and Business S cogdoches, Texas 75962-3 one (936) 468-2206 * Fax (9 Contractors, Inc. X 75963-1447 s.com to: n State University X 75962-6085 Payable UDESCRIPTION vith best industry construction nd guaranteed for one (1) ful f completion against all defect or shall comply with all local, orders, ordinances, laws, rul of duly constituted authorities over this work. o be completed as mutually ind between the University ar Failure to complete work (in y the mutually agreed date sl a breach of contract. 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| and aro other pr necessa property taken. Paymer or as ot and the The Co Contrac insuran such ins | bund work site at all f rotective devices are ary to prevent injury y. All reasonable pr nt will be made lump therwise mutually ag University. Intractor shall not co ct until Contractor ha ice required hereund | times. Barricades and to be used as to persons or ecautions are to be o-sum upon completion reed between Contractor mmence work under this is obtained all the ler and certificates of filed with and reviewed | | | | | | |
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| certificates by SFASU shall not relieve or decrease the liability of the Contractor. If policies are not written for the amounts specified below (except Workers' Compensation a Employer's Liability), Contractor shall carry Excess Liability insurance for any difference in amounts specified. If Excess Liability insurance is provided, it shall follow the form of the primary policy. This insurance shall not be canceled, limited in scope of coverage, or non-renewed until after thirty (30) days prior written notice, or ten (10) days for non-payment of premium, has been given the University. Contractor's insurance shall be deemed | | | | | | | | |
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| Item | Des | scription | | Quantity | Unit Cost | Total Cost |
| primary with respect to any insurance carried by Stephen F. Austin State University for liability arising out of operations under this Contract. The Board of Regents of The University of Texa System, Stephen F. Austin State University Camp shall be named as additional insured. This is not applicable to the Workers' Compensation policy. The Workers' Compensation and Employer's Liability policy will provide a waiver of subrogation in favor of the University. The Workers' Compensation insurance coverage must include the responsibility of the Contractor to provide coverage for every worker either under the Contractor's policy or under the policy provided by a subcontractor. The Contractor's | | nder this Contract. The University of Texas State University Campus al insured. This is not Compensation policy. on and Employer's a waiver of University. on insurance coverage ility of the Contractor ery worker either under nder the policy | | | | |
| Purchaser: L | aDonna OHara | (936) 4684 | 584 | AD | DITIONAL CHARGE | : |
| Vendor ID: 1 Req No: R Blanket Order: | | Collegiate I Employee/Employee Rela | ationship: | ER ER Coop - TIPS-T | ISCOUNT/TRADE-IN TOTAL | - |
| | | runs nightly and terminates | | | | fied by Purchaser. |
| | 773430 \$195,027.00 | | | | | |

| | Stephen F. | Austin State Univ | ersitv | / | | | | Page 12 | |
|---|--|--|----------------------|---|--------------------------|--|-------------|------------|--|
| | Member of T | The University of Texas S | | , | | PO Number: | P2402 | 904 | |
| | | d Business Services exas 75962-3030 | | | | PO Date: | 06/05/2 | 24 | |
| Supplier: | Phone (936) 468- | 2206 * Fax (936) 468-428 | 82 | | | Delivery Date: | 07/31/2 | 24 | |
| DBA: CoxJo PO Box 631 | | | С | ACCE | PTAN | PT OF PURCHA ICE OF DELIVI PURCHASE@ | ERY DAT | E | |
| shelby@coxj | ones.com | | | | | | | | |
| P.O. Box 608 Nacogdoche | Austin State Univers | - | Ship to | Kristophe Physical I Physical I 2104 Wils SFA Box | Plant Plant son Dr | 101 | | | |
| | | | Nacogdoches TX 75962 | | | | | | |
| Terms: Net 30 FOB: Installe | ed | | | | | ER NO. MUST A CUMENTS AND | | | |
| ltem | De | scription | | Quanti | ity | Unit Cost | | Total Cost | |
| Subcont comper insuran policy. Unle Contrac Work of accepte coverag TYPE O Worker Employ | nsation coverage of ce coverage is provident ctor shall provide an overed in this Contri ed by SFASU, the n ge as follows: OF COVERAGE / L cs' Compensation C | to provide workers' a worker, that such vided by the Contractor's ded for herein, the nd maintain, until the ract is completed and ninimum insurance IMITS OF LIABILITY overage OR 00,000 occur/aggregate | | | | | | | |
| Purchaser: La | aDonna OHara | (936) 4684 | 4584 | | - | TIONAL CHARGE | | | |
| Vendor ID: 10 Req No: R Blanket Order: HUB Status: F | | Collegiate Employee/Employee Rel med Purcha | ationship | | | OUNT/TRADE-IN TOTAL | | TINUED | |
| | Warrant Hold proces 773430 \$195,027.0 | s runs nightly and terminate | s any vei | ndors on hold. | Vendo | r EPLS status verif | ied by Purc | chaser. | |

| Characteristic Stephen F. Austin State University | | | | | | Page 13 | |
|--|-------------------------|---|-------------------|------------------------------|-------|------------|--|
| Member of The University of Texas System Procurement and Business Services Nacogdoches, Texas 75962-3030 | | | | PO Number: | | P2402904 | |
| | | | | PO Date: | 06/05 | 5/24 | |
| Supplier: Phone (936) 468-2206 * Fax (936) 468-42 | 82 | | | Delivery Date: | 07/31 | 1/24 | |
| Cox Concrete Contractors, Inc. DBA: CoxJones PO Box 631447 Nacogdoches TX 75963-1447 | | CONFIRM RECEIPT OF PURCHASE ORDER AND ACCEPTANCE OF DELIVERY DATE BY EMAILING PURCHASE@SFASU.EDU. | | | | | |
| shelby@coxjones.com | | | | | | | |
| Send Billing Invoice to: Stephen F. Austin State University P.O. Box 6085 Nacogdoches, TX 75962-6085 ATTN: Accounts Payable | Ship to: | Ship to: Kristopher Orheim Physical Plant Physical Plant 101 2104 Wilson Dr SFA Box 13031 | | | | | |
| | | Nacogdoches TX 75962 | | | | | |
| Terms: Net 30 FOB: Installed | I | PURCHASE ORDER NO. MUST APPEAR ON ALL SHIPPING DOCUMENTS AND INVOICES | | | | | |
| Item Description | | Quanti | ty | Unit Cost | | Total Cost | |
| -\$2,000,000 products/completed operations aggr Comprehensive Automobile Liability -\$1,000,000 ea accident- Combined Single Limit | | | | | | | |
| Purchaser: LaDonna OHara (936) 468 | (936) 4684584 | | ADDITIONAL CHARGE | | 100 | | |
| Reg No. R0081320 | Reg No: R0081320 | | DISC | DISCOUNT/TRADE-IN: TOTAL: | | .00 | |
| Blanket Order: Employee/Employee Relationship: ER | | | | 195,027.00 | | | |
| HUB Status: Female Woman Owned Purchase Class: Coop - TIPS-TAPS Vendor Warrant Hold process runs nightly and terminates any vendors on hold. Vendor EPLS status verified by Purchaser. | | | | | | | |
| 949060-30220-773430 \$195,027.00 | | | | | | | |