

# BLANKET PURCHASE ORDER

## STATE OF MARYLAND

\*\*\*\*\* STATE OF MARYLAND \*\*\*\*\*

**BPO NO:** 001B5400298

**PRINT DATE:** 10/31/15

**PAGE:** 01

<b>SHIP TO:</b> AS SPECIFIED ON INDIVIDUAL ORDERS		
<b>VENDOR ID:</b> KR CONTRACTING INC 223 N PROSPECT ST STE 105 HAGERSTOWN, MD 21740 (301 )797-7569	<b>REFER QUESTIONS TO:</b>  MICHELLE FRIERSON (410 )767-3002 MICHELLE.FRIERSON@MARYLAND.GOV	
<b>ITB:</b> 001IT819687	<b>EXPR DATE:</b> 02/01/18 <b>POST DATE:</b> 01/29/15	<b>DISCOUNT TERMS:</b> . NET 30 DAY <b>CONTRACT AMOUNT:</b> 325,593.60

### TERMS:

ARTICLES HEREIN ARE EXEMPT FROM MARYLAND SALES AND USE TAXES BY EXEMPTION CERTIFICATE NUMBER 3000256-3 AND FROM FEDERAL EXCISE TAXES BY EXEMPTION NUMBER 52-73-0358K. IT IS THE VENDOR'S RESPONSIBILITY TO ADVISE COMMON CARRIERS THAT AGENCIES OF THE STATE OF MARYLAND ARE EXEMPT FROM TRANSPORTATION TAX.

H00 15 33471 0823 \$ 45,221.33  
H00 16 33471 0823 \$108,531.20  
H00 17 33471 0823 \$108,531.20  
H00 18 33471 0823 \$ 63,309.87

SMALL BUSINESS RESERVE.

LIVING WAGE TIER:2

<u>LINE #</u>	<u>STATE ITEM ID</u>	<u>U/M</u>	<u>UNIT COST</u>		
0001	99046-GRDURM	LT	251,320.0000		

SECURITY GUARDS SERVICE

TO PROVIDE UNARMED UNIFORMED GUARD SERVICE FOR THE MARYLAND DEPARTMENT OF GENERAL SERVICES AT THE MARY E.W. RISTEAU (BEL AIR) DISTRICT COURT/MULTI-SERVICE CENTER FOR A PERIOD OF THREE YEARS BEGINNING FEBRUARY 1, 2015 THROUGH JANUARY 31, 2018.

HOURLY BILLING RATE FOR GUARD: \$12.20

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<u>LINE #</u>	<u>STATE ITEM ID</u>	<u>U/M</u>	<u>UNIT COST</u>
0002	99046-GRDURM	LT	74,273.6000

SECURITY GUARDS SERVICE

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HOURLY BILLING RATE FOR GUARD SUPERVISOR: \$12.20

\_\_\_\_\_ END OF ITEM LIST \_\_\_\_\_

THE BLANKET PURCHASE ORDER (BPO) ISSUED AS A RESULT OF THE INVITATION TO BID (ITB) AND ANY SUBSEQUENT AMENDMENTS, MODIFICATIONS OR OPTIONS ISSUED RELEVANT TO THE ITB OR BPO, SHALL COMPLY WITH ALL OF THE TERMS, CONDITIONS AND SPECIFICATIONS ISSUED WITH THE ITB AND ARE INCORPORATED IN AND MADE PART OF THE BPO.

IF THE STATE OF MARYLAND OR OTHER REGULATOR BODY REQUIRES A LICENSE OR CERTIFICATE TO PERFORM THE SERVICES REQUIRED, PLEASE PROVIDE THE LICENSE NUMBER AND DATE OF ISSUANCE.

106-4210  
LICENSE NUMBER

7/31/2017  
DATE OF EXPIRATION

\*\*\*\*\* LAST PAGE \*\*\*\*\*

**AUTHORIZED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
BUYER AUTHORIZED DESIGNEE