STATE OF NEW JERSEY

DEPARTMENT OF THE TREASURY

AGENCY REQUEST FOR PROPOSAL

VENDOR NAME AND ADDRESS:	**RETURN THIS PROPOSAL TO:** Michael Pasternak Michael.Pasternak@tech.nj.gov (609)-376-7176	**DELIVER TO:** 1 Schwarzkopf Dr, Ewing Township, NJ 08628, USA	
SBE CATEGORY:	**FAX NUMBER:**		
NOTE: This proposal must be received by the opening date/time at the place named above. 05/05/2026 1:00 PM	**AGENCY PERSON TO CONTACT:** TBD		
FISCAL YEAR: 26	**ACCOUNT NUMBER:**	**AGENCY REFERENCE NUMBER:** 06409297	**COMMODITY CODE NUMBER:** DPA C/C - 206:00

ITEM NUMBER	QUANTITY	UNIT	DESCRIPTION (ALL ITEMS MUST BE DELIVERED F.O.B. DESTINATION)	UNIT PRICE	AMOUNT
1	1		Items and Quantities As Per		
			Attached Excel Sheet		
PRICES ARE FIRM UNTIL THE FOLLOWING DATE:				**TOTAL**	

CASH DISCOUNT:	**DATE OF DELIVERY:**	**VENDOR'S FEDERAL I.D. NUMBER:**	**VENDOR'S TELEPHONE NUMBER:**
VENDOR'S SIGNATURE (Must be Signed):		**PRINT OR TYPE NAME BELOW:**	**DATE:**

CC-120 rev. 01/24