### BLANKET PURCHASE ORDER

STATE OF MARYLAND

BPO NO: 001B06000017  PRINT DATE: 06/05/19  PAGE: 01

**SHIP TO:**

AS SPECIFIED ON INDIVIDUAL ORDERS

<table>
<thead>
<tr>
<th>VENDOR ID:</th>
<th>REFER QUESTIONS TO:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALLIANCE INC</td>
<td>FRANCINE JACKSON</td>
</tr>
<tr>
<td>8003 CORPORATE DR</td>
<td>(410) 767-3039</td>
</tr>
<tr>
<td>NOTTINGHAM, MD 21236</td>
<td><a href="mailto:FRANCINE.JACKSON@MARYLAND.GOV">FRANCINE.JACKSON@MARYLAND.GOV</a></td>
</tr>
<tr>
<td>(410) 282-5900</td>
<td></td>
</tr>
</tbody>
</table>

**ITB:**

<table>
<thead>
<tr>
<th>EXPR DATE:</th>
<th>DISCOUNT TERMS:</th>
<th>NET 30 DAY</th>
</tr>
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<tbody>
<tr>
<td>06/30/20</td>
<td>.</td>
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**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.

DGS - JANITORIAL SERVICES AT THE SHILLMAN BUILDING

1ST RENEWAL OPTION


OPERATING FUNDS

H00 20 33449 0813 $148,336.00

VENDOR NAME : ALLIANCE INCORPORATED
VENDOR CONTACT: JAMES PADGETTE
VENDOR PHONE : 410-282-5900
VENDOR EMAIL : JPADGETTE@ALLIANCEINC.ORG

AGENCY CONTACT: BRIAN KRAMER
AGENCY PHONE : 410-878-8240
AGENCY EMAIL : BRIAN.KRAMER@MARYLAND.GOV

PLEASE RETAIN IFB AND ANY ATTACHMENTS FOR FUTURE REFERENCE

*** CONTINUED, NEXT PAGE ***
THE STATE RESERVES THE RIGHT TO ADJUST THE SCOPE OF WORK PROVIDED IN
THE IFB SPECIFICATIONS IN ORDER TO KEEP EXPENDITURES WITHIN
AUTHORIZED APPROPRIATIONS.

<table>
<thead>
<tr>
<th>LINE #</th>
<th>STATE ITEM ID</th>
<th>U/M</th>
<th>UNIT COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>91039-JNITOR</td>
<td>LT</td>
<td>130,974.4200</td>
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</table>

JANITORIAL SERVICES

TO PROVIDE JANITORIAL SERVICES FOR THE SHILLMAN BUILDING LOCATED AT
500 N. CALVERT STREET, BALTIMORE MD 21202 FOR A PERIOD OF ONE (1)
YEAR, WITH ONE (1) YEAR RENEWAL OPTION REMAINING, EFFECTIVE 7/1/2019
THROUGH 6/30/2020, IN ACCORDANCE WITH THE STATES TERMS, CONDITIONS,
REQUIRED CONTRACT PROVISIONS, AND SPECIFICATIONS.

$10,914.54/MONTH, $130,974.42/YEAR
TOTAL ONE (1) YEAR COST: $130,974.42

<table>
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</thead>
<tbody>
<tr>
<td>0002</td>
<td>91039</td>
<td>LT</td>
<td>8,146.0600</td>
</tr>
</tbody>
</table>

JANITORIAL/CUSTODIAL SERVICES

ADD ALTERNATE #1: CLEAN & SHAMPOO CARPET (ANNUALLY) IN ACCORDANCE
WITH THE TERMS, CONDITIONS REQUIRED CONTRACT PROVISIONS AND
SPECIFICATIONS

$8,146.06/ALTERNATE,$8,146.06/YEAR

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<table>
<thead>
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<th>U/M</th>
<th>UNIT COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>0003</td>
<td>91039</td>
<td>LT</td>
<td>4,424.2900</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>TOTAL ONE (1) YEAR COST = 8,146.06</td>
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</tbody>
</table>

JANITORIAL/CUSTODIAL SERVICES

ADD ALTERNATE #2: CLEAN LIGHT FIXTURES (ANNUALLY) IN ACCORDANCE WITH THE TERMS, CONDITIONS REQUIRED CONTRACT PROVISIONS AND SPECIFICATIONS
$4,424.29/ALTERNATE,$4,424.29/YEAR
TOTAL ONE (1) YEAR COST, ONE (1) ALTERNATE = $4,424.29

| 0004   | 91039         | LT  | 2,276.4100   |
|        |               |     | TOTAL ONE (1) YEAR COST = $2,276.41 |

JANITORIAL/CUSTODIAL SERVICES

ADD ALTERNATE #3: CLEAN VENETIAN BLINDS (ANNUALLY) IN ACCORDANCE WITH THE TERMS, CONDITIONS REQUIRED CONTRACT PROVISIONS AND SPECIFICATIONS
$2,276.41/ALTERNATE,$2,276.41/YEAR
TOTAL ONE (1) YEAR COST, ONE (1) ALTERNATE = $2,276.41

| 0005   | 91039         | LT  | 2,514.8200   |
|        |               |     | TOTAL ONE (1) YEAR COST = $2,514.82 |

JANITORIAL/CUSTODIAL SERVICES

ADD ALTERNATE #4: CLEAN INTERIOR/EXTERIOR WINDOWS (ANNUALLY) IN ACCORDANCE WITH THE TERMS, CONDITIONS REQUIRED CONTRACT PROVISIONS AND SPECIFICATIONS
$2,514.82/ALTERNATE,$2,514.82/YEAR
TOTAL ONE (1) YEAR COST = $2,514.82

END OF ITEM LIST

*** CONTINUED, NEXT PAGE ***
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.

________________________        _______________________
LICENSE NUMBER                DATE OF EXPIRATION

IF YOU ARE A DEPARTMENT OF TRANSPORTATION CERTIFIED MINORITY BUSINESS, PLEASE PROVIDE YOUR CERTIFICATION NUMBER.

___________________________________
MDOT'S MBE CERTIFICATION NUMBER

******* LAST PAGE *******