BLANKET PURCHASE ORDER
STATE OF MARYLAND

SHIP TO:
AS SPECIFIED ON INDIVIDUAL ORDERS

VENDOR ID:
UNIVERSAL SECURITY LLC
1 RESEARCH COURT
SUITE 450
ROCKVILLE, MD 20850
(301) 216-3804

REFER QUESTIONS TO:
TONIA V. WELLS
(410) 767-4720
TONIAV.WELLS@MARYLAND.GOV

ITB: 001IT820395 EXPR DATE: 06/01/20
POST DATE: 05/16/17 DISCOUNT TERMS: . NET 30 DAY
CONTRACT AMOUNT: 214,531.20

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.

OPERATING FUNDS:

N00 17 G5000 0819 $3,098.78
N00 17 G0010 0819 $834.28
N00 17 G3010 0819 $1,191.84
N00 17 G4100 0819 $417.15
N00 17 G6010 0819 $417.15
N00 18 G5000 0819 $37,185.42
N00 18 G0010 0819 $10,011.48
N00 18 G3010 0819 $14,302.08
N00 18 G4100 0819 $5,005.72
N00 18 G6010 0819 $5,005.72
N00 19 G5000 0819 $37,185.42
N00 19 G0010 0819 $10,011.46
N00 19 G3010 0819 $14,302.08
N00 19 G4100 0819 $5,005.72
N00 19 G6010 0819 $5,005.72
N00 20 G5000 0819 $34,086.64
N00 20 G0010 0819 $9,177.18
N00 20 G3010 0819 $13,110.24
N00 20 G4100 0819 $4,588.57
N00 20 G6010 0819 $4,588.57

VENDOR CONTACT: DWAYNE HILL, DHILL@UNIVERSALSECURITYLLC.COM,
301-216-3804.

*** CONTINUED, NEXT PAGE ***
AGENCY CONTACT: DAVID DREES, DAVID.DREES@MARYLAND.GOV, 301-600-2457.

SMALL BUSINESS RESERVE CERTIFICATION: SB12-2173

PLEASE RETAIN IFB AND ANY ATTACHMENTS FOR FUTURE REFERENCE.

_______________________________ 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.

*** CONTINUED, NEXT PAGE ***
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.

____106-4721_______        ____1/31/20___________
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

____106-4721_______        ____1/31/20___________
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

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