

ITB No. 17-425-001-F Office Furniture and Files**Section 7.1 Ordering Instructions Form****Respondent Information**

RESPONDENT NAME:	Workrite Ergonomics
RESPONDENT FEID NO.:	86-0940724
MFMP / SPURS VENDOR NO.:	[Enter Respondent's MFMP / SPURS Vendor Number, if Known]
STREET ADDRESS:	2277 Pine View Way STE 100
CITY, STATE and ZIP:	Petaluma, CA 95954-5827
INTERNET ADDRESS:	http://www.workriteergo.com
TELEPHONE NO.:	707-780-6400
TOLL-FREE NO.:	800-959-9675
FAX NO.:	800-930-8989

Person Responsible For Administering The Contract

NAME:	John H. Felt
TITLE:	GSA Representative – Workrite
STREET ADDRESS:	2277 Pine View Way STE 100
CITY, STATE and ZIP:	Petaluma, CA 95954-5827
E-MAIL ADDRESS:	JFelt@workriteergo.com
TELEPHONE NO.:	804-493-1854
TOLL-FREE NO.:	800-959-9675
CELL PHONE NO.:	[Enter Contact's Cell Phone Number (Optional)]
FAX NO.:	804-493-1425 (direct Admin POC) 800-930-8989 (Customer Service)

Ordering and Remit-To Information Please provide information where Customers should direct orders. You must provide a regular mailing address and email address. If equipped to receive purchase orders electronically, you may also provide an Internet Address.

REMIT-TO:	Workrite Ergonomics
REMIT-TO STREET ADDRESS:	3214 Momentum Place
REMIT-TO CITY, STATE and ZIP:	Chicago, IL 60689-5332
REMIT-TO EMAIL and/or INTERNET ADDRESS:	ar@kv.com

Note: Please make sure the Ordering Instructions information provided above matches the MyFloridaMarketPlace ("MFMP") Vendor Registration account information (<http://vendor.myfloridamarketplace.com/>).

PLEASE DUPLICATE ON ADDITIONAL TABS IF NEEDED.