Bid Opening Results For:

IFB NUMBER 23062

BID OPENING 8/8/2017

GROUP NUMBER 79008

PURCHASING OFFICER Christopher Martinez

TELEPHONE (518) 473-7790

DESCRIPTION
Bank Card Services (Fuel Card Services)
(Statewide)
# Request for Proposals (Revised)

**BID OPENING:**
- **DATE:** August 8, 2017
- **TIME:** 11:00 A.M. EST
- **REQUEST FOR PROPOSALS NUMBER:** 23062

**TITLE:** Group 79008 – BANK CARD SERVICES (FUEL CARD SERVICES) (Statewide)
- **Classification Codes:** 15, 84

**CONTRACT PERIOD:** June 22, 2018 – June 21, 2021 with the possibility of extensions up to two (2) additional years

**DESIGNATED CONTACTS:**
- In accordance with the Procurement Lobbying Law [State Finance Law § 139–j(2)(a)], the following individuals are the Designated Contacts for this Solicitation. All questions relating to this Solicitation must be addressed to the Designated Contacts.

<table>
<thead>
<tr>
<th>Contact</th>
<th>Role</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christopher Martinez</td>
<td>Contract Management Specialist</td>
<td>Telephone No. (518) 473-7790</td>
</tr>
<tr>
<td>E-mail address</td>
<td><a href="mailto:christopher.martinez@ogs.ny.gov">christopher.martinez@ogs.ny.gov</a></td>
<td></td>
</tr>
<tr>
<td>James Jasiewicz</td>
<td>Team Leader</td>
<td>Telephone No. (518) 486-5238</td>
</tr>
<tr>
<td>E-mail address</td>
<td><a href="mailto:james.jasiewicz@ogs.ny.gov">james.jasiewicz@ogs.ny.gov</a></td>
<td></td>
</tr>
</tbody>
</table>

### For MWBE Questions Only
**Email Address:** MWBE@ogs.ny.gov

<table>
<thead>
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<tbody>
<tr>
<td>Anuola Surgick</td>
<td>Telephone No. (518) 486-6886</td>
</tr>
<tr>
<td>Phone:</td>
<td>(518) 408-1551</td>
</tr>
</tbody>
</table>

### For INSURANCE Questions Only
**Email Address:** ogs.sm.insrev@ogs.ny.gov

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<tbody>
<tr>
<td>Leighann Brown</td>
<td>Telephone No. (518) 457-6595</td>
</tr>
</tbody>
</table>

**Bidder's Federal Tax Identification Number:**
- **(Do Not Use Social Security Number)**
  - 58-1091383

**NYS Vendor Identification Number:**
- **(See New York State Vendor File Registration Clause)**
  - 110000790

**Legal Business Name of Company Bidding:**
- Mansfield Oil Company of Gainesville, Inc.

**D/B/A – Doing Business As (if applicable):**
- 1025 Airport Parkway, SW

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>County</th>
<th>Zip Code</th>
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<tr>
<td>1025 Airport Parkway, SW</td>
<td>Gainesville</td>
<td>GA</td>
<td>Hall</td>
<td>30501-6813</td>
</tr>
</tbody>
</table>

**E-mail Address:** mfmjr@mansfieldoil.com

**Company Web Site:** mansfield.energy

### If applicable, place an "x" in the appropriate box(es) (check all that apply)
- NYS Small Business
  - # Employees
- Service Disabled Veteran Owned Business
- NYS Minority Owned Business
- NYS Women Owned Business

**If you are not bidding, place an "x" in the box and return this page only:**
- **WE ARE NOT BIDDING AT THIS TIME BECAUSE:**

### For PROCUREMENT-SERVICES USE ONLY

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<th>Literature</th>
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<th>OTHER</th>
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<td>CD/DVD</td>
<td>SDHC CARD</td>
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<td>Documented by:</td>
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23062RFPrev1
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- **TIME:** 11:00 A.M. EST
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<td><a href="mailto:ggs_sm_ps_cm_fleasfuelroa_ge@ogs.ny.gov">ggs_sm_ps_cm_fleasfuelroa_ge@ogs.ny.gov</a></td>
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<th>Tryphina Ramsey</th>
<th>Anthony Tomaselli</th>
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<td>(518) 408-1551</td>
<td>Phone No. (518) 474-2015</td>
</tr>
</tbody>
</table>

**For MWBE Questions Only**
- **Email Address:** MWBE@ogs.ny.gov

**For SDVOB Questions Only**
- **Email Address:** VeteransDevelopment@ogs.ny.gov

**For INSURANCE Questions Only**
- **Email Address:** cgs_sm_insrev@ogs.ny.gov

**Leighann Brown**
- **Telephone No.** (518) 457-6696

**Bidder's Federal Tax Identification Number:**
- 84-1425616

**Legal Business Name of Company Bidding:**
- WEX BANK

**D/B/A – Doing Business As (if applicable):**

<table>
<thead>
<tr>
<th>Street</th>
<th>Suite</th>
<th>City</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>7070 Salmi Park Center</td>
<td>Suite 350</td>
<td>MIDVALE</td>
<td>UT 84107</td>
</tr>
</tbody>
</table>

**Company Web Site:**
- www.wexinc.com

**If applicable, place an “X” in the appropriate box(es) (check all that apply):**

- NYS Small Business
- # Employees
- Service Disabled Veteran
- Owned Business
- NYS Minority Owned
- Business
- NYS Women Owned
- Business

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**FOR PROCUREMENT SERVICES USE ONLY**
- LITERATURE □  LETTER □  FLASH DRIVE □  OTHER □  # of Binders/ Packages: 
- PURC. MEMO □  CD/DVD □  SDHC CARD □  Documented by: