



City of Port St. Lucie
Procurement Management Division
121 SW Port St. Lucie Blvd., Port St. Lucie, FL 34984

[CITY ELECTRIC SUPPLY CO] RESPONSE DOCUMENT REPORT

IFB No. 20260197

Electrical Supplies and Equipment, Purchase and Delivery

RESPONSE DEADLINE: June 17, 2026 at 2:00 pm

Report Generated: Wednesday, June 17, 2026

City Electric Supply Co Response

CONTACT INFORMATION

Company:

City Electric Supply Co

Email:

gsales@cityelectricsupply.com

Contact:

Kyle Rose

Address:

1229 PERRY RD

STE 104

APEX, NC 27502

Phone:

(984) 849-4850 Ext: 2

Website:

N/A

Submission Date:

Jun 17, 2026 12:54 PM (Eastern Time)

ADDENDA CONFIRMATION

Addendum #1

Confirmed Jun 8, 2026 1:17 PM by NOAH CASEY

QUESTIONNAIRE

1. Mandatory Forms

CONTRACTOR'S GENERAL INFORMATION WORKSHEET*

It is understood and agreed that the following information is to be used by the City to determine the qualifications of prospective Contractor to perform the work required. The Contractor waives any claim against the City that might arise with respect to any decision concerning the qualifications of the Contractor.

The undersigned attests to the truth and accuracy of all statements made on this questionnaire. Also, the undersigned hereby authorizes any public official, Engineer, Surety, bank, material or equipment manufacturer, or distributor, or any person, firm or corporation to furnish the City any pertinent information requested by the City deemed necessary to verify the information on this questionnaire.

Please download the below documents, complete, and upload.

- [PSL-Contractor's General In...](#)

General_Information_worksheet.pdf

E-VERIFY FORM *

Please download the below documents, complete, and upload.

- [E-Verify Form.pdf](#)

E-Verify_Form_PSL.pdf

E-Verify_Affidavit_FL_CES_2026.pdf

NON-COLLUSION AFFIDAVIT *

Please download the below documents, complete, and upload.

- [Non-Collusion Affidavit-fil...](#)

Non-Collusion_Affidavit-fillable.pdf

SUPPLIER LOCATION CERTIFICATION

Please download the below documents, complete, and upload.

- [Supplier Location Certifica...](#)

Supplier_Location_Certification_Form_(1)_(1).pdf

PSL_Google_Map_Print.pdf

COPY OF W-9*

2026_W-9.pdf

COPY OF CERTIFICATE OF INSURANCE *

General_COI_-_2026-27.pdf

COPY OF LICENSES OR CERTIFICATIONS*

Division_of_Corp.pdf

COPY OF BID BOND *

BID_BOND.jpg

2. Electronic Confirmation

CONE OF SILENCE AND COMMUNICATION DOCUMENT*

To ensure fair consideration is given for all Proposers, it must be clearly understood that upon release of the proposal and during the proposal process, firms and their employees of related companies as well as paid or unpaid personnel acting on their behalf shall not contact or participate in any type of contact with City employees, department heads or elected officials, up to and including the Mayor

and City Council. The “Cone of Silence” is in effect for this solicitation from the date the solicitation is advertised on the OpenGov Portal, until the time an award decision has been approved by City Council and fully executed by all parties. Information about the Cone of Silence can be found under the City Code of Ordinances, Section 35.13. Contact with anyone other than the Issuing Officer may result in the vendor being disqualified. All contact must be coordinated through the Issuing Officer, for the procurement of these services.

Confirmed

CONTRACTOR'S CODE OF ETHICS*

The City of Port St Lucie (“City”), through its Procurement Management Division (“Procurement Management Division”) is committed to a procurement process that fosters fair and open competition, is conducted under the highest ethical standards and enjoys the complete confidence of the public. To achieve these purposes, Procurement Management Division requires each vendor who seeks to do business with the City to subscribe to this Contractor’s Code of Ethics.

- ◆ A Contractor’s bid or proposal will be competitive, consistent and appropriate to the bid documents.
- ◆ A Contractor will not discuss or consult with other Vendors intending to bid on the same Contract or similar City Contract for the purpose of limiting competition. A Vendor will not make any attempt to induce any individual or entity to submit or not submit a bid or proposal.
- ◆ Contractor will not disclose the terms of its bids or proposal, directly or indirectly, to any other competing Vendor prior to the bid or proposal closing date.
- ◆ Contractor will completely perform any Contract awarded to it at the contracted price pursuant to the terms set forth in the Contract.
- ◆ Contractor will submit timely, accurate and appropriate invoices for goods and/or services actually performed under the Contract.
- ◆ Contractor will not offer or give any gift, item or service of value, directly or indirectly, to a City employee, City official, employee family member or other vendor contracted by the City.
- ◆ Contractor will not cause, influence or attempt to cause or influence, any City employee or City Official, which might tend to impair his/her objectivity or independence of judgment; or to use, or attempt to use, his/her official position to secure any unwarranted privileges or advantages for that Vendor or for any other person.

◆ Contractor will disclose to the City any direct or indirect personal interests a City employee or City official holds as it relates to a Vendor contracted by the City.

◆ Contractor must comply with all applicable laws, codes or regulations of the countries, states and localities in which they operate. This includes, but is not limited to, laws and regulations relating to environmental, occupational health and safety, and labor practices. In addition, Contractor must require their suppliers (including temporary labor agencies) to do the same. Contractor must conform their practices to any published standards for their industry. Compliance with laws, regulations and practices include, but are not limited to, the following:

- o Obtaining and maintaining all required environmental permits. Further, Contractor will endeavor to minimize natural resource consumption through conservation, recycling and substitution methods.
- o Providing workers with a safe working environment, which includes identifying and evaluating workplace risks and establishing processes for which employee can report health and safety incidents, as well as providing adequate safety training.
- o Providing workers with an environment free of discrimination, harassment and abuse, which includes establishing a written antidiscrimination and anti-bullying/harassment policy, as well as clearly noticed policies pertaining to forced labor, child labor, wage and hours, and freedom of association.

DISCLAIMER: This Code of Ethics is intended as a reference and procedural guide to Contractors. The information it contains should not be interpreted to supersede any law or regulation, nor does it supersede the applicable Contractor Contract. In the case of any discrepancies between it and the law, regulation(s) and/or contractor contract, the law, regulatory provision(s) and/or vendor contract shall prevail.

Confirmed

DRUG FREE WORKPLACE*

The undersigned Contractor in accordance with section 287.087, Florida Statutes, hereby certifies that they comply fully with the below requirements.

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.

2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under proposal a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under proposal, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 Florida Statutes or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

Confirmed

AFFIDAVIT OF NONGOVERNMENT ENTITY ANTI-HUMAN TRAFFICKING LAWS*

In accordance with section 787.06(13), Florida Statutes, the representative of the nongovernmental entity bidder ("Entity"), attests under penalty of perjury that the Entity does not use coercion for labor or services as defined in section 787.06.

Confirmed

VENDOR SCRUTINIZED COMPANIES LIST CERTIFICATION*

Sections [287.135](#) and [215.473](#), Florida Statutes, prohibit Florida municipalities from contracting with companies, for goods or services over \$1,000,000 that are on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or to engage in any Business operations with Cuba or Syria. Sections 287.135 and 215.4725 also prohibit Florida municipalities from contracting with companies, for goods or services in any amount that are on the list of Scrutinized Companies that Boycott Israel.

The list of "Scrutinized Companies" is created pursuant to Section 215.473, Florida Statutes. A copy of the current list of "Scrutinized Companies" can be found at the following link:

https://www.sbafla.com/media/mqodaonn/2024_12_17_-israel-scrutinized-companies-list-for-web.pdf

As the person authorized to sign on behalf of the Respondent Vendor, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies with Activities in Sudan List; or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; is not participating in a boycott of Israel; and does not have any business operations with Cuba or Syria. I understand that pursuant to Sections 287.135 and 215.473, Florida Statutes, the submission of a false certification may subject the Respondent Vendor to civil penalties, attorney's fees, and/or costs.

I understand and agree that the City may immediately terminate any contract resulting from this solicitation upon written notice if the company referenced above are found to have submitted a false certification or any of the following occur with respect to the company or a related entity: (i) for any contract for goods or services in any amount of monies, it has been placed on the Scrutinized Companies that Boycott Israel List, or is engaged in a boycott of Israel, or (ii) for any contract for goods or services of one million dollars (\$1,000,000) or more, it has been placed on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or it is found to have been engaged in business operations in Cuba or Syria.

Confirmed

I CERTIFY THAT I HAVE READ, UNDERSTOOD, AND AGREED TO THE TERMS OUTLINED IN THIS SOLICITATION, INCLUDING ALL ADDENDA, NOTICES, AND THE QUESTION & ANSWER SECTION. FURTHERMORE, I CONFIRM THAT I AM AUTHORIZED TO SUBMIT THIS RESPONSE ON BEHALF OF MY COMPANY.*

Confirmed

PRICE TABLES

A) CORE ITEMS

[CITY ELECTRIC SUPPLY CO] RESPONSE DOCUMENT REPORT
IFB No. 20260197
Electrical Supplies and Equipment, Purchase and Delivery

Contractor are requested to submit pricing for all core items listed. A price of \$0.00 will be interpreted as no cost to the City. All pricing shall be firm, fixed, and inclusive of all discounts, freight, delivery, and associated charges. Estimated quantities are provided for evaluation purposes only and do not represent a purchase commitment.

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Conduit 1/2 Sch 80 Gray 10ft	1,400	FT	\$0.4514	\$631.96
2	Conduit 3/4 Sch 80 Gray 10ft	600	FT	\$0.6664	\$399.84
3	Conduit 1 Sch 80 Gray 10ft	400	FT	\$0.9416	\$376.64
4	Conduit 1-1/2 Sch 80 Gray 10ft	20,000	FT	\$1.4399	\$28,798.00
5	Conduit 1/2 EMT Steel 10ft	100	FT	\$0.5363	\$53.63
6	Conduit 3/4 EMT Steel 10ft	100	FT	\$0.9021	\$90.21
7	1/2 90 Degree L/T Snap Connector	1,500	EA	\$3.3236	\$4,985.40
8	1/2 L/T Snap Connector	2,700	EA	\$2.1021	\$5,675.67
9	60 Amp Service Disconnect (BRAND/MODEL: GE)	1,800	EA	\$15.00	\$27,000.00
10	Wire #12 Black Stranded 500ft Roll	17,500	FT	\$0.2678	\$4,686.675
11	Wire #12 Red Stranded 500ft Roll	15,000	FT	\$0.2678	\$4,017.15
12	Wire #12 White Stranded 500 ft Roll	17,500	FT	\$0.2678	\$4,686.675
13	Wire #12 Green Stranded 500ft Roll	17,500	FT	\$0.2678	\$4,686.675
14	Wire #12 Green Solid 500ft Roll	1,000	FT	\$0.25	\$250.00

[CITY ELECTRIC SUPPLY CO] RESPONSE DOCUMENT REPORT
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 Electrical Supplies and Equipment, Purchase and Delivery

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
15	Wire #12 Blue Stranded 500ft Roll	2,500	FT	\$0.2678	\$669.525
16	Wire #12 Brown Stranded 500ft Roll	2,500	FT	\$0.2678	\$669.525
17	Wire #12 Orange Stranded 500ft Roll	2,500	FT	\$0.2678	\$669.525
18	Wire #12 Yellow Stranded 500ft Roll	1,000	FT	\$0.2678	\$267.81
19	Wire #14 Black Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
20	Wire #14 Red Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
21	Wire #14 White Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
22	Wire #14 Green Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
23	Wire #14 Blue Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
24	Wire #14 Brown Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
25	Wire #14 Orange Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
26	Wire #14 Yellow Stranded 500ft Roll	2,000	FT	\$0.1812	\$362.48
27	Duct Seal Putty	600	EA	\$2.75	\$1,650.00
28	Terminal Block (BRAND/MODEL: Sq. D / 9080GD6)	200	EA	\$16.50	\$3,300.00
29	Terminal Block / Bus Bar 600V (BRAND/MODEL: Sq. D / 9080GRE6)	600	EA	\$4.60	\$2,760.00
30	Terminal Block Endcap - Large (BRAND/MODEL: Sq. D)	100	EA	\$6.00	\$600.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
31	Terminal Block Endcap - Small (BRAND/MODEL: Sq. D)	100	EA	\$6.00	\$600.00
32	DIN Rail End Bracket w/ Screw (BRAND/MODEL: Sq. D)	100	EA	\$6.00	\$600.00
33	Starter Size 1	15	EA	\$533.13	\$7,996.95
34	Starter Size 2	20	EA	\$969.59	\$19,391.80
35	Starter Size 3	10	EA	\$1,567.80	\$15,678.00
TOTAL					\$144,091.50

B) NON-CORE ITEMS

Contractor shall provide one fixed percentage discount that will apply to all non-core electrical supply items. The Contractor shall enter the discount amount in the Percentage Discount column. Although the field may display a dollar sign (\$), the value entered will be interpreted strictly as a percentage, and the dollar sign shall be disregarded. For example, entering "15" equals fifteen percent (15%) off the Contractor's published catalog or list price. All catalog/list pricing shall be fully inclusive of all discounts, freight, delivery, and any associated charges. The percentage discount shall remain firm for the duration of the contract. Bidding on Cost Table (B) is optional. If the Contractor chooses not to submit a discount, they shall select the "No Bid" box. Entering 0 in the Percentage Discount field will be interpreted as no discount offered to the City.

Line Item	Description	Quantity	Unit of Measure	Percentage Discount off catalog price	Total	No Bid
36	Non-core electrical supply items percentage discount that will apply to all.	1	%	\$10.00	\$10.00	

Line Item	Description	Quantity	Unit of Measure	Percentage Discount off catalog price	Total	No Bid
TOTAL					\$10.00	



CONTRACTOR'S GENERAL INFORMATION WORK SHEET

1. Corporation, Partnership, Joint Venture, Individual or other? Corporation

2. Firm's name and main office address, telephone and fax numbers

Name: City Electric Supply Company

Address: 400 S Record Street STE #1500 Dallas TX 75202

Telephone Number: 941-204-3755

Fax Number: _____

3. Contact person: Kyle Rose Email: kyle.rose@cityelectricsupply.com

4. Firm's previous names (if any). _____

5. How many years has your organization been in business? 43 years

6. Is the firm claiming Local Preference under City Ordinance 35.12? YES / ☒ NO

7. List the license(s) that qualifies your firm to construct this project: _____

Division of Corporations - G36615

8. List five (5) similar to this project completed by your firm in the last 5 years along with a brief description of project, location of project, client name, client phone number, email, value of contract, your firm's percentage of the total contract value, as well as the number of change orders and the total change order value. **DO NOT USE the City of Port St Lucie as a reference.**

Project Number 1

Project Name: Pinellas County Board of County Commissioners

Description: Supplied Electrical components and Lighting

Location: Pinellas County

Client Name, Phone Number & Email: Colton MaCumbee - 727-464-3494

Value of Total Contract:

Date of Completion:

Firm's Percentage of Total Contract:

Number of Change Orders:

Value of Change Orders:

Was Project Completed on Schedule:

Was Project Completed within Budget?

Project Number 2

Project Name: City of Tallahassee

Description: Provided Generators for various substations

Location: Tallahassee FL

Client Name, Phone Number & Email: Steve Dotson - 850-891-5070

Value of Total Contract:

Date of Completion:

Firm's Percentage of Total Contract:

Number of Change Orders:

Value of Change Orders:

Was Project Completed on Schedule:

Was Project Completed within Budget?

Project Number 3

Project Name: Marion County Schools

Description: Electric Supply Contract

Location: Marion County

Client Name, Phone Number & Email: Garrett McCallum - Garrett.Mccallum@marion.k12.fl.us

Value of Total Contract:

Date of Completion:

Firm's Percentage of Total Contract:
Number of Change Orders:
Value of Change Orders:
Was Project Completed on Schedule:
Was Project Completed within Budget?

Project Number 4

Project Name:	Pinellas County Schools
Description:	Electric Supply Contract

Location:	Pinellas County
Client Name, Phone Number & Email:	Angelo Molfetta - Molfettaa@pcsb.org
Value of Total Contract:	
Date of Completion:	
Firm's Percentage of Total Contract:	
Number of Change Orders:	
Value of Change Orders:	
Was Project Completed on Schedule:	
Was Project Completed within Budget?	

Project Number 5

Project Name:	Miami Dade County Schools
Description:	MRO Supply Contract

Location:	Miami Dade County
Client Name, Phone Number & Email:	Pedro Marinez - Martinez@dadeschool.net
Value of Total Contract:	
Date of Completion:	
Firm's Percentage of Total Contract:	
Number of Change Orders:	
Value of Change Orders:	
Was Project Completed on Schedule:	
Was Project Completed within Budget?	

9. List the number of personnel that will be assigned to the project and include job titles and their licenses or certifications.

Kathleen Ferland - Branch Manager - City Electric Supply Port St Lucie

Joseph Petrie - District Manager Treasure Coast - City Electric Supply

10. Has the Contractor or any principals of the applicant organization failed to qualify as a responsible Contractor; refused to enter into a contract after an award has been made; failed to complete a contract during the past five (5) years or been declared to be in default in any contract or been assessed liquidated damages in the last five (5) years? List the name of project, location, client, engineer, date and reason. Use additional pages if needed.

Total Number of Projects where Failure to Complete Work Occurred: N/A

Project Number 1

Project Name:

Project Location:

Client Name and Phone Number:

Engineer Name and Phone Number:

Date:

Reason:

Insert additional projects if needed.

11. Has the Contractor or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into receivership?

Yes ()

No (✓)

If yes, please explain:

12. List any lawsuits pending or completed within the past five (5) years involving the corporation, partnership or individuals with more than ten percent (10 %) interest:

NONE

(N/A is not an acceptable answer - insert lines if needed)

13. List any judgments from lawsuits in the last five (5) years:

None

(N/A is not an acceptable answer - insert lines if needed)

14. List any criminal violations and/or convictions of the Proposer and/or any of its principals:

NONE

(N/A is not an acceptable answer - insert lines if needed)

15. List subcontractors and major material suppliers for the project. Include telephone numbers. Insert additional sheets if necessary.

NONE



Signature

Business Development Manager Government Solutions

Title



E-Verify Form

Supplier/Consultant acknowledges and agrees to the following:

1. Shall utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the Supplier/Consultant during the term of the contract; and
2. Shall expressly require any subcontractors performing work or providing services pursuant to the state contract to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.
3. The Contractor hereby represents that it is in compliance with the requirements of Sections 448.09 and 448.095, Florida Statutes. The Contractor further represents that it will remain in compliance with the requirements of Sections 448.09 and 448.095 Florida Statutes, during the term of this contract and all attributed renewals.
4. The Contractor hereby warrants that it has not had a contract terminated by a public employer for violating Section 448.095, Florida Statutes, within the year preceding the effective date of this contract. If the Contractor has a contract terminated by a public employer for any such violation during the term of this contract, it must provide immediate notice thereof to the City.

E-Verify Company Identification Number 1413194

Date of Authorization 08/15/2023

Name of Contractor City Electric Supply Company

Name of Project Electrical Supplies and Equipment

Solicitation Number
(If Applicable) 20260197

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on June, 8, 2026 in Tampa (city), FL (state).

Kyle Rose

Digitally signed by Kyle Rose
Date: 2026.06.08 15:13:57 -04'00'

Signature of Authorized Officer

Kyle Rose - Business Development Manager Government Solutions

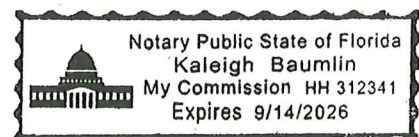
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE 8 DAY OF June, 2026.

NOTARY PUBLIC K. Baal Kaleigh Baumlin

My Commission Expires: 9/14/2026





E-VERIFY COMPLIANCE AFFIDAVIT

I HEREBY CERTIFY that City Electric Supply Company is a business entity operating in the State of Florida and is subject to the requirements of Florida Statute 448.095. The undersigned Human Resource Manager, is acting in their official capacity and with full authority to execute this affidavit on behalf of City Electric Supply Company.

I FURTHER CERTIFY that City Electric Supply Company is in full compliance with Florida Statute 448.095, which requires employers to register with and use the E-Verify system to verify the work authorization status of newly hired employees. The company has registered with the E-Verify system operated by the United States Department of Homeland Security and maintains active participation in the program. All newly hired employees are verified through the E-Verify system in accordance with the requirements and timelines established by Florida Statute 448.095 and federal regulations. The company maintains records of E-Verify verification for all employees as required by applicable law.

IN WITNESS WHEREOF, I have hereunto subscribed my name on this Affidavit this 14 day of May, 2026

Michele Elliott

MICHELE ELLIOTT, HUMAN
RESOURCE MANAGER CITY ELECTRIC
SUPPLY COMPANY

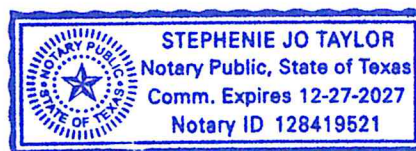
CERTIFICATE OF ACKNOWLEDGMENT

STATE OF TEXAS)
) SS.
COUNTY OF DALLAS)

THIS INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON THIS 14 DAY OF May, 2026 BY
MICHELE ELLIOTT.

Stephenie Jo Taylor
NOTARY PUBLIC, STATE OF TEXAS

PRINTED NAME: Stephenie Jo Taylor
MY COMMISSION EXPIRES: 12-27-2027





NON-COLLUSION AFFIDAVIT

State of Florida }

County of Hillsborough }

Kyle Rose, being first duly sworn, disposes and says that:
(Name/s)

1. They are BDM - GOVT SOL of City Electric Supply Company the Proposer that
(Title) (Name of Company)

has submitted the attached PROPOSAL;

2. He is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such PROPOSAL;

3. Such Proposal is genuine and is not a collusive or sham Proposal;

4. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contract for which the attached proposal has been submitted or to refrain from proposing in connection with such Contract or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached Proposal or of any other Proposer, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the City of Port St. Lucie or any person interested in the proposed Contract; and

5. The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.



(Signed) Kyle Rose Digitally signed by Kyle Rose
Date: 2026.06.08 15:20:04
-04'00'
(Title) Business Development Manager - Govt Solutions

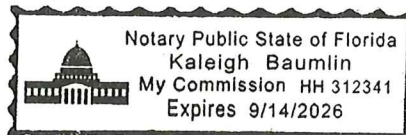
STATE OF FLORIDA }
COUNTY OF ST. LUCIE } SS:

The foregoing instrument was acknowledged before me this (Date) June 8th, 2026
by: Kyle Rose who is personally known to me or who has produced
_____ as identification and who did (did not) take an oath.

Commission No. HH 312341

Notary Print: Kaleigh Baumlín

Notary Signature: [Signature]





SUPPLIER LOCATION CERTIFICATION

The undersigned, as a duly authorized representative of the Supplier listed herein, certifies to the best of their knowledge and belief, that the Supplier's location is correctly reflected based upon the below information. For purposes of this section, "Location" shall mean a business which:

- a) How far is the Supplier's fixed office or distribution point located from City Hall; and
8.7 Miles
- b) Is the principal offeror who is a single offeror; a business which is the prime contractor and not a subcontractor; or a partner or joint venturer submitting an offer in conjunction with other businesses.

Complete the following and upload this document and the Google Maps print out to the required sourcing platform:

Business Name: <u>City Electric Supply Company</u>	
Current Local Address: <u>655 NW Enterprise DR Port St Lucie FL 34986</u>	Phone: <u>772-871-0115</u>
Length of time at this address: <u>10+ Years</u>	Fax:
Please provide your prior business address if the above address has been for less than one (1) year, prior to the issuance of this solicitation.	
Length of time at this address:	
Home Office Address: <u>400 S Record Street STE #1500 Dallas TX 75202</u>	Phone:
Length of time at this address: <u>5+ Years</u>	Fax:

(Signed) Kyle Rose
(Title) Business Development Manager - Govt Solutions

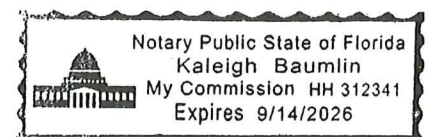
STATE OF FLORIDA }
COUNTY OF ST. LUCIE } SS:

The foregoing instrument was acknowledged before me this (Date) June 8th, 2026

by: Kyle Rose who is personally known to me or who has produced

Kaleigh Baumlin as identification and who did (did not) take an oath.

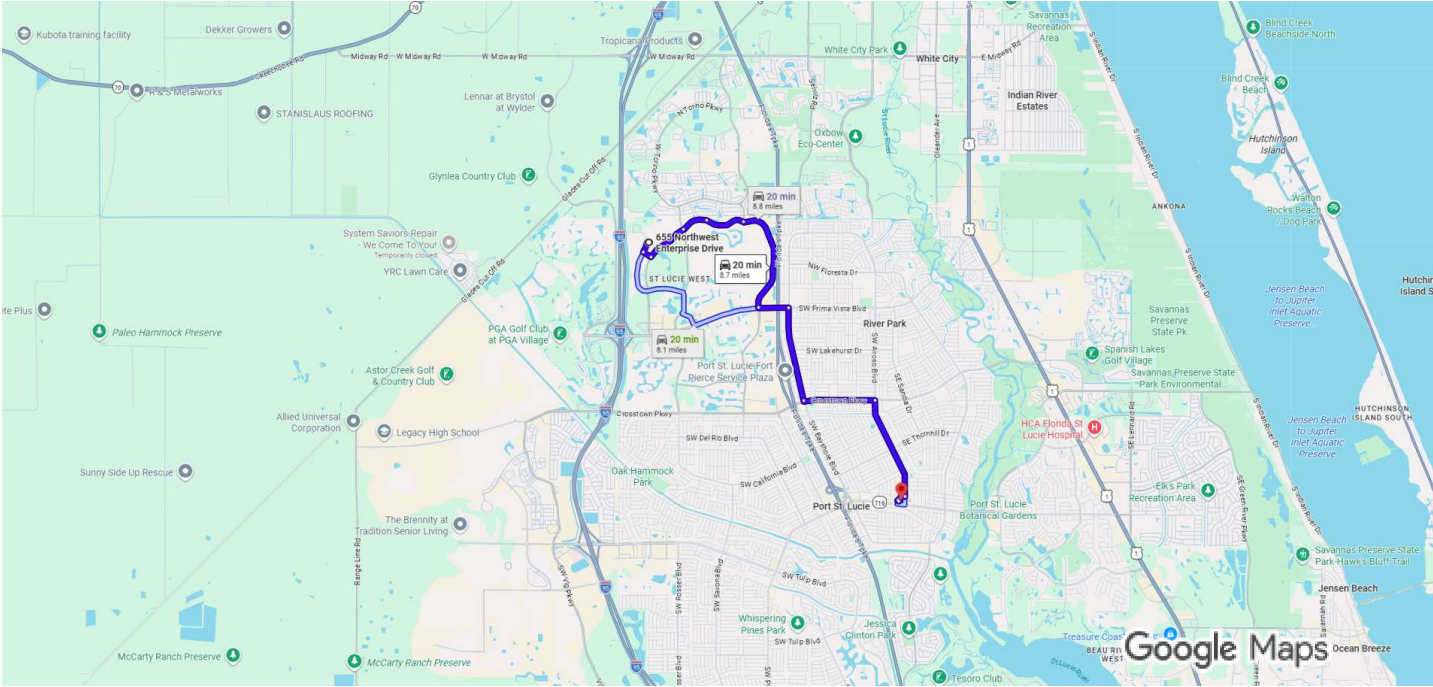
Kaleigh Baumlin K. Rose Commission No. HH312341
Notary (print & sign name)





655 NW Enterprise Dr, Port St. Lucie, FL
34986 to 121 SW Port St Lucie Blvd, Port St. Lucie, FL 34984

Drive 8.7 miles, 20 min



Map data ©2026 Google 1 mi

- via NW Cashmere Blvd

Fastest route now due to traffic conditions

20 min

8.7 miles
- via SW Airoso Blvd

20 min

8.1 miles
- via NW Cashmere Blvd and SW Airoso Blvd

Some traffic, as usual

20 min

8.8 miles

Explore nearby 121 SW Port St Lucie Blvd

- Restaurants
- Hotels
- Gas stations
- Parking Lots
- More

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) City Electric Supply Company	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☒ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions.	
	5 Address (number, street, and apt. or suite no.). See instructions. 400 S Record Street	Requester's name and address (optional)
	6 City, state, and ZIP code Dallas, TX 75202	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

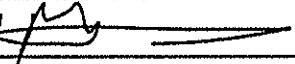
Social security number								
			-					
or								
Employer identification number								
5	9	-	2	2	7	9	4	9 8

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person 

Date **01/01/2026**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/24/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown Insurance Services, Inc. 900 North Point Parkway, Suite 300 Alpharetta, GA 30005 www.bbatlanta.com	CONTACT NAME: Rebecca Wolf PHONE (A/C, No, Ext): 770-512-5034 E-MAIL ADDRESS: Rebecca.wolf@bbbrown.com FAX (A/C, No): 770-512-5050														
INSURED City Electric Supply Company Etal (See Attached List) 400 S. Record Street, Suite 1500 Dallas TX 75202	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : Travelers Property Casualty Co of America</td><td>25674</td></tr><tr><td>INSURER B : The Charter Oak Fire Insurance Company</td><td>25615</td></tr><tr><td>INSURER C : Zurich American Insurance Company</td><td>16535</td></tr><tr><td>INSURER D :</td><td></td></tr><tr><td>INSURER E :</td><td></td></tr><tr><td>INSURER F :</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Travelers Property Casualty Co of America	25674	INSURER B : The Charter Oak Fire Insurance Company	25615	INSURER C : Zurich American Insurance Company	16535	INSURER D :		INSURER E :		INSURER F :	
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INSURER C : Zurich American Insurance Company	16535														
INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES**CERTIFICATE NUMBER:** 89847565**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ PER LOC AGG GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☒ LOC OTHER:			TJGLSA-0T012153-TIL-26	3/25/2026	3/25/2027	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$25,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☒ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			TC2JCAP-0T012165-TIL-26	3/25/2026	3/25/2027	COMBINED SINGLE LIMIT (Ea accident) \$3,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$10,000			CUP-8X232641-26	3/25/2026	3/25/2027	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☒ N	N/A	TC2O-UB-6X408065-26-51-K	3/25/2026	3/25/2027	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	First Party Crime			MPL 3041627-00	3/25/2026	3/25/2027	\$1,000,000 - \$100K Deductible

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

City Electric Supply Company
Etal (See Attached List)
400 S. Record Street, Suite 1500
Dallas TX 75202

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Timothy Soriano

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ACORD 25 (2016/03)

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ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Brown & Brown Insurance Services, Inc.		NAMED INSURED City Electric Supply Company Etal (See Attached List) 400 S. Record Street, Suite 1500 Dallas TX 75202	
POLICY NUMBER TJGLSA-0T012153-TIL-26		EFFECTIVE DATE: 3/25/2026	
CARRIER Travelers Property Casualty Co of America	NAIC CODE 25674		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance (03/16)

HOLDER: City Electric Supply Company Etal (See Attached List)

ADDRESS: 400 S. Record Street, Suite 1500 Dallas TX 75202

Named Insured Schedule:

Alaric Capital, LP
 Alaric Capital G.P. LLC
 CES Holdings Inc.
 CES Property Investments, Inc
 CES Investments, Inc.
 Labora Collections, Inc.
 Labora Group, Inc.
 Labora Real Estate, Inc.
 Labora Investments, Inc.
 City Electric Supply Company
 D/B/A CEFCO USA
 D/B/A Tamlite Lighting
 D/B/A Centaur Manufacturing
 D/B/A Deluce Lighting
 400 S. Record Street, LLC
 Colorado Electric Supply, Ltd.
 Concord Electrical Supply Ltd.
 LC Family Office LLC
 Elecimport USA, Inc.
 HMN Management Services, LLC
 Eighty Three Creative Inc.
 Whitebox Real Estate LLC
 Whitebox Project Management, LLC
 309 S. Market Street, LLC
 Labora Services, Inc



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation

CITY ELECTRIC SUPPLY COMPANY

Filing Information

Document Number	G36615
FEI/EIN Number	59-2279498
Date Filed	05/03/1983
State	FL
Status	ACTIVE
Last Event	CORPORATE MERGER
Event Date Filed	04/30/2012
Event Effective Date	04/30/2012

Principal Address

400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Changed: 04/24/2024

Mailing Address

400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Changed: 04/24/2024

Registered Agent Name & Address

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

Name Changed: 05/27/2026

Address Changed: 05/27/2026

Officer/Director Detail

Name & Address

Title President, Director

Gray, John
400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Title Director

Dawes, Andrew
400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Title Secretary, Director

Flaherty, Philip
400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Title VP

Feidler, Blair
400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Title Treasurer

Kalbach, Mike
400 S. RECORD STREET
STE#1500, Attn: Legal
DALLAS, TX 75202

Title Director

Saunders, Jeremy
400 S. Record Street
Suite 1500, Attn: Legal
Dallas, TX 75202

Annual Reports

Report Year	Filed Date
2025	03/24/2025
2026	02/20/2026
2026	03/06/2026

Document Images

[05/27/2026 -- Reg. Agent Change](#)

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[03/06/2026 -- AMENDED ANNUAL REPORT](#)

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[02/20/2026 -- ANNUAL REPORT](#)

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09/08/2025 -- AMENDED ANNUAL REPORT	View image in PDF format
03/24/2025 -- ANNUAL REPORT	View image in PDF format
04/24/2024 -- ANNUAL REPORT	View image in PDF format
01/29/2024 -- Reg. Agent Change	View image in PDF format
04/14/2023 -- ANNUAL REPORT	View image in PDF format
04/05/2022 -- ANNUAL REPORT	View image in PDF format
04/08/2021 -- ANNUAL REPORT	View image in PDF format
04/03/2020 -- ANNUAL REPORT	View image in PDF format
01/24/2019 -- ANNUAL REPORT	View image in PDF format
02/26/2018 -- ANNUAL REPORT	View image in PDF format
01/19/2017 -- ANNUAL REPORT	View image in PDF format
03/15/2016 -- ANNUAL REPORT	View image in PDF format
02/24/2015 -- ANNUAL REPORT	View image in PDF format
01/08/2014 -- ANNUAL REPORT	View image in PDF format
03/30/2013 -- ANNUAL REPORT	View image in PDF format
05/02/2012 -- Merger	View image in PDF format
04/30/2012 -- Merger	View image in PDF format
04/27/2012 -- Merger	View image in PDF format
04/27/2012 -- Merger	View image in PDF format
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04/27/2012 -- Merger	View image in PDF format
04/19/2012 -- ANNUAL REPORT	View image in PDF format
03/27/2012 -- Merger	View image in PDF format
03/28/2011 -- ANNUAL REPORT	View image in PDF format
03/18/2011 -- ANNUAL REPORT	View image in PDF format
03/26/2010 -- ANNUAL REPORT	View image in PDF format
03/25/2010 -- Merger	View image in PDF format
03/25/2010 -- Merger	View image in PDF format
02/13/2009 -- ANNUAL REPORT	View image in PDF format
08/18/2008 -- Amendment	View image in PDF format
03/24/2008 -- Merger	View image in PDF format
02/11/2008 -- ANNUAL REPORT	View image in PDF format
07/06/2007 -- ANNUAL REPORT	View image in PDF format
03/24/2006 -- Merger	View image in PDF format
03/16/2006 -- ANNUAL REPORT	View image in PDF format
02/23/2005 -- ANNUAL REPORT	View image in PDF format
10/28/2004 -- Merger	View image in PDF format
04/20/2004 -- ANNUAL REPORT	View image in PDF format
04/17/2003 -- ANNUAL REPORT	View image in PDF format
05/06/2002 -- ANNUAL REPORT	View image in PDF format
04/27/2001 -- ANNUAL REPORT	View image in PDF format
04/27/2000 -- ANNUAL REPORT	View image in PDF format
03/09/2000 -- Merger	View image in PDF format
05/08/1999 -- ANNUAL REPORT	View image in PDF format
04/09/1998 -- ANNUAL REPORT	View image in PDF format
05/19/1997 -- ANNUAL REPORT	View image in PDF format

04/29/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format
05/03/1983 -- FILINGS PRIOR TO 1995	View image in PDF format

5. Bonds and/or Letter of Credit, Permits

5.1. Bid Bond

~~Each responding Contractor must supply a Bid Bond or Bid Deposit (certified check, cashier's check, bank money order, bank draft of any national or state bank), in a sum of not less than five percent (5%) of the bid total made payable to the City. As a Mandatory Requirement, the Bid Bond or Bid Deposit must be scanned and uploaded as part of the Vendor Submission along with all other required documents, thus showing evidence that a Bid Bond or Bid Deposit was obtained. Responding Contractors must send the Original Bid Bond or Bid Deposit to the City within ten (10) business days after the IFB Due Date as reflected above in the Schedule of Events. The responding Contractor's proposal will be considered non Responsive if the Bid Bond or Bid Deposit is not received within the specified time frame. Responding Contractors must submit a Bid Bond or Bid Deposit made payable to the City in a sealed envelope to:~~

~~A'lexis Curry-Hibbert
121 S.W. Port St. Lucie Blvd.
Port St. Lucie, FL 34984
Attn: Procurement Management Division~~

~~Bonds must be issued by a Surety authorized to do business in the State of Florida, in order to guarantee that the Contractor will enter into a contract to deliver products and/or related services outlined in this solicitation, strictly within the terms and conditions stated in the Contract.~~

5.2. Certification

Proposal Certification