SECTION 7 - BID FORM PRICING

Contractor shall provide only one (1) response per Item. For example, Item A – Conventional Size Restroom response shall only include a response for either A-1, A-2, A-3, etc. No multiple bids per item are allowed.

GROUP 1 - EAST CAMPUS

NO.	ITEM	UOM	QTY	PRICE	EXTENDED P	RICE
1	SCA Tork #TM1616 500 sheets/rl, 96 rls/cs, 3.75" length sheet size	cs	1,800		\$	-
			OR	4		
2	Cascades North River #4064 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	CS	2,105		\$	-
			OR			
3	Bedford Paper #SBT-503 500 sheets/rl, 96 rls/cs, 3.75" length sheet size	cs	1,595		\$	-
			OR			
4	Bedford Paper #SBT-501 500 sheets/rl, 96 rls/cs, 3.50" length sheet size	CS	1,900	39.41	\$ 74,879.	00 ⁻
			OR			
5	Or Equal (Provide Description)	cs	1,595		\$	-
	Item A - Co	onvention	al Size Resti	room Tissue Subtotal	\$74,879.0	υ -
					PERCENTAC	SE.
	Provide Percentage of Rec	ycled Post	Consumer C	content of your Product	65	%
				ontent of your Product	100	%

NO.	ITEM	UOM	QTY	PRICE	EXTENDED	PRICE
1	Tork USA #TJ0922A 1000'/rl, 12 rls/cs, 3.50" length sheet size	cs	590		\$	-
	La					
2	Kruger Products Embassy #05620 1000'/rl, 8 rls/cs 3.50" length sheet size	cs	880		\$	
3	Kimberly Clark/Scott Essential #07805 1000'/rl, 12 rls/cs 3.55" length sheet size	cs	590		\$	
4	Cascades North River #4097 1000'/rl, 12 rls/cs 3.50" length sheet size	cs	590		\$	-
5	Bedford Paper #JRT-404 1000'/rl, 12 rls/cs 3.30" length sheet size	cs	590	25.08	\$ 14,797	.25 -
6	Or Equal (Provide Description)	cs	590		\$14,797	. D -
	Item B - 9" Ju	mbo Junio	or Size Rest	room Tissue Subtotal	\$	14
					PERCENT	AGE
	Provide Percentage of Rec	vcled Post	Consumer (Content of your Product	65	%
				Content of your Product	100	%

NO.	ITEM	UOM	QTY	PRICE	EXTENDED P	RICE
1	Tork USA Premium #MB540A 250 towels/pk,16 pks/cs, 9" x 9.5" sheet	CS	2,838		\$	
2	Kruger Embassy Premium #01540 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	CS	2,838		\$	
3	Kruger White Swan Classic #01920 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	CS	2,838		\$	
4	Bedford Paper #MF101 250 towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	CS	2,838	21.00	\$ 59598	,00
5	Cascades North River #1342 250 towels/pk, 16 pks/cs, 9.10" x 9.50"	CS	2,838		\$	
6	Scott Essential #01840 250 towels/pk,16 pks/cs, 9.20" x 9.40"	CS	2,838		\$	
7	Or Equal (Provide Description)	cs	2,838		\$	
		Item C	- Multi-Fold	Paper Towels Subtotal	\$ 59598	00
					PERCENT	AGE
	Provide Percentage of Re	ecycled Po	st Consumer	Content of your Product	65	

GROUP 2 - WEST CAMPUS

NO.	ITEM	MOU	QTY	PRICE	EXTENDED PR	ICE
tem D -	Conventional Size Restroom Tissue					
1	Wausau Bay West Eco Soft #54000 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	CS	712		\$	3
2	SCA Tork #TM1616 500 shts/rl, 96 rls/cs, 4.00" length sheet size	CS	712		\$	•
3	Cascades North River #4064 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	CS	712		\$	
4	Atlas #A250 500 sheets/rl, 96 rls/cs, 4.50" sheet size	cs	634		\$	-
5	Bedford Paper #SBT-501 500 sheets/rl, 96 rls/cs, 3.50" length sheet size	CS	712	39.41	\$ 28,059.5	12
6	Or Equal (Provide Description)	cs	712		AZBYOSKE	2-
	Item D -	Conventio	nal Size Res	stroom Tissue Subtotal	\$ 28,059.9	2 -
					PERCENTAG	GE
	Provide Percentage of Re	ecycled Pos	st Consumer	Content of your Product	65	9/
	Provide Percer	ntage of Re	cycled Fiber	Content of your Product	(00	%

NO.	ITEM	UOM	QTY	PRICE	EXTENDED P	RICE
1	Georgia Pacific Blue Basic (Previously Acclaim) #20204 250 towels/pk,16 pks/cs, 9.4" x 9.2" sheet	CS	194		\$	-
2	Kimberly Clark Scott Essential #01804 250 towels/pk, 16 pks/cs, 9.2" x9.4" sheet	CS	194		\$	1/-
3	Tork USA Premium #MB540A / 420580 250 towels/pk,12 pks/cs, 9" x 10" sheet	CS	194		\$	
4	Cascades Décor #1759 250 towels/pk,16 pks/cs, 9" x 9.5" sheet	CS	194		\$	
5	Tork USA #CB530 250 towels/pk, 16 pks/cs, 10.13" x 12.75" sheet	CS	194		\$	
	Bedford Paper #MF101 250					
6	towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	CS	194	21.00	\$ 4074.0	0 -
7	Or Equal (Provide Description)		2000			
,		CS	194		\$	-
		Item E -	Multi-Fold F	Paper Towels Subtotal	\$ 4074.00	-
	2 - 14 - 2				PERCENTAG	E
	Provide Percentage of Re				65	%
	Provide Percent	tage of Rec	ycled Fiber C	Content of your Product	(00)	%

NO.	ITEM	MON	QTY	PRICE	EXTENDED PR	ICE
1	Wausau Bay West Eco Soft #41090 90 sheets/rl, 30 rls/cs,11" x 9" sheet	CS	166		\$	
2	Georgia Pacific Blue (formally Preference) #27385 85 sheets/rl, 20 rls/cs, 11" x 8.8" sheet	CS	270		\$	-
3	Kimberly Clark Scott #41482 128 sheets/rl, 20 rls/cs, 11" x 8.75"	CS	180		\$	
4	Tork USA Universal #HB1995 210 sheets/rl, 12 rls/cs, 11" x 9" sheet	CS	222		\$,
5	Kruger White Swan #01656 80 sheets/rl, 30 rls/cs, 10.9" x 8.6" sheet	cs	184		\$	
6	Bedford Paper #HHT085 85 sheets/rl, 30 rls.cs, 8" x 11" sheet	CS	194	22.49	\$ 4363.06	, -
7	Or Equal (Provide Description)	CS	194		\$	
	1	Item	F - Perforate	d Roll Towels Subtotal	\$4363.06	
					PERCENTAG	E
	Provide Percentage of Re	ecycled Po	st Consumer	Content of your Product	65	9/
	Provide Percei	ntage of Re	ecycled Fiber	Content of your Product	100	9

NO.	ITEM	MOU	QTY	PRICE	EXTENDED PR	ICE
1	Marcal Sani-Hanks #682 40 sheets/bx, 200 bx/cs, 7.5" sheet size	cs	96		\$	
			OR			
2	Kruger Products White Swan #08500 80 sheets/bx, 135 bx/cs, 8.0" sheet size	cs	72		\$	×
	O.O. OHOOK SIZE		OR			
3	Sani Facial Tissue #MoreX 40 sheets/bx, 200 bx/cs, 7.88" sheet size	cs	96		\$	-
			OR			
4	Or Equal (Provide Description) Soni Paga (Justice (month)	cs	80	45.00	\$ 3600	ě
	2 pls while 40 1 Bux	Item G - B	oxed Facial T	Fissue (Large) Subtotal	\$ 3600 \$ 3600	
					PERCENTAG	E
	Provide Percentage of R	ecycled Po	ost Consumer	Content of your Product	65	9/
	Provide Perce	ntage of R	ecycled Fiber	Content of your Product	(00)	9
tem H	- Boxed Facial Tissue (Large)					
1	Wausau Bay West Eco Soft #13000 100 sheets/bx, 30 bxs/cs, 8" sheet size	cs	24		\$	
			OR			
2	Georgia-Pacific Preference #48100 100 sheets/bx, 30 bxs/cs, 8" sheet size	cs	24		\$	
			OR			
3	Kruger Products White Swan #08301 100 sheets/bx, 30 bxs/cs, 7.4" sheet size	cs	24		\$	-
			OR			
4	Cascades North River #4082 100 sheets/bx, 30 bxs/cs, 7.5" sheet	cs	24		\$	-
		1	OR			
5	Georgia Pacific #GP47410 100 sheets/bx, 30 bxs/cs, 8.00" sheet	cs	24	19.50	\$ 468,00	
			OR			
6	Or Equal (Provide Description)	cs	24		\$	-
		Item H - B	oxed Facial 1	Fissue (Large) Subtotal	\$ 464.00	14
					PERCENTAG	E
	Provide Percentage of R	Recycled Po	ost Consumer	Content of your Product	65	9
				Content of your Product	60	0

NO.	ITEM	MON	QTY	PRICE	EXTENDED	PRICE
1	Kleenex #11090 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	CS	3,400		\$	
			OR			
2	Georgia Pacific #280-55 Pref Ultra White 1 ply, 7.87" x 600', 12 rls/cs, 7,200 ft/cs	cs	1,728		\$	
			OR			
3	Kruger Embassy Supreme #01240 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	cs	3,400		\$, s
			OR			
4	Bedford Paper #HWTW552 White 1 ply, 7.81" x 800', 6 rls/cs, 4,800ft/cs	cs	3,400	2000	40, 80 CD	(X) -
		Item	I - Hard Roll	Paper Towels Subtotal	\$ 86,00	90,95
					PERCENT	AGE
	Provide Percentage of R	ecycled Po	st Consumer	Content of your Product	65	%
	Provide Perce	ntage of R	ecycled Fiber	Content of your Product	100	%
				GRAND TOTAL	\$ 280,78	9.18

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

X	President
(Signature	
	CORPORATE SEAL (If available)
BID MUST BI	E SIGNED AND NOTARIZED (WITH SEAL) FOR CONSIDERATION
Subscribed and sworn to before n	ne this 3 day of OX.TUBER AD, 2022
(My Commission Expires:
Call 10	OFFICIAL SEAL MARIA E ROMERO NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires Dec. 17, 2025
	SEAL

Signature on File

SECTION 9 - MANDATORY FORM FURNISH & DELIVER PAPER PRODUCTS (RESTROOM TISSUE, PAPER TOWELS, ETC.) 22-112-FM

	PLEASE TYPE OR PRINT TI	HE FOLLOW	VING INFORMATION)					
Full Name of Bidder	Valdes LLC							
Main Business Address		667 Chaddick Dr.						
City, State, Zip Code	Wheeling, IL, 6	0090						
Telephone Number	847-657-6000	Email Address	Shahir ahmed Ovaldes supply,					
Bid Contact Person	Shahir Ahma	ed e						
4 1 .	a Member authorized to sign on behalf of the Partnership and that the members of the F		Officer of the a Member of the Jo orporation Venture or Officers of the Corporation are as follows:					
Shahir Alv (President or Par	tner)	-	(Vice-President or Partner)					
(Secretary or Par	tner)	-	(Treasurer or Partner)					
nat this bid is made without coorms of agreement and the coof the Procurement Officer,	ollusion with any other person ontract specifications for the a DuPage County, 421 North	n, firm or cor bove design County Far	ted in this bid as principals are those named herei rporation; that he has fully examined the propose nated purchase, all of which are on file in the offic m Road, Wheaton, Illinois 60187, and all oth- ations and attached exhibits, including					
oddenda No. 1,,	, and issued thereto.							
nd other means of construct	oses and agrees, if this bid is a ion, including transportation s ontract documents in the mar	services nec	provide all necessary machinery, tools, apparatu essary to furnish all the materials and equipme e therein prescribed.					
ne Bidder and in accordance	ies and warrants that he is du with the Partnership Agreeme n is binding upon the Bidder a	ent or by-law	ed to execute this certification/affidavit on behalf over the Corporation, and the laws of the State and accurate.					
urther, the undersigned certif ither 720 Illinois Compiled Sta .CS 130/1 et seq., the Illinois	atutes 5/33 E-3 or 5/33 E-4, b	ed from biddi id rigging or	ing on this contract as a result of a violation of bid-rotating, or as a result of a violation of 820					
he undersigned certifies that ubmitting this bid, and that the	he has examined and carefull e statements contained hereir	y prepared to are true and	his bid and has checked the same in detail before d correct.					
a Corporation, the undersign ere properly adopted by the E	ed, further certifies that the re Board of Directors of the Corp	citals and re	esolutions attached hereto and made a part hereo meeting of said Board of Directors duly called an					

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPONDENCE TO CONTRACTOR:		REMIT TO CONTRACTOR:		
NAME	Valdes LLC	NAME	Valdes LLC	
CONTACT	Shahir Ahmed	CONTACT	Shahir Ahmed	
ADDRESS	667 Chaddick Dr.	ADDRESS	667 Chaddick Dr.	
CITY ST ZIP	Wheeling, IL, 60090	CITY ST ZIP	Wheeling, IL, 60090	
TX	847-657-6000	TX	847-657-6000	
FX	MA	FX	NA	
EMAIL	Shahir Ahmad O Valdessupp	y EMAIL	Shahir. Ahmed@	
	COM		Valdessupply.com	
COUNTY BILI	TO INFORMATION:	COUNTY SHIP TO INFORMATION:		
EAST CAMPL	JS	EAST CAMPUS		
DuPage Coun	ty Facilities Management	DuPage County		
421 North Cou	unty Farm Road	Various Locations		
Wheaton, IL 6	0187	Wheaton, IL 60187		
TX: (630) 407	7-5700	TX: (630) 407-5705		
EMAIL: FMAc	countsPayable@dupageco.org	EMAIL: mary.ventrella@dupageco.org		
WEST CAMP	US	WEST CAMPUS		
DuPage Coun	ty Care Center	DuPage County Care Center		
400 North County Farm Road		421 North County Farm Road		
Wheaton, IL 6	0187	Wheaton, IL 60187		
TX: (630) 784	1-4273	TX: (630) 784-4273		
		EMAIL: vinit.patel@dupageco.org		

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DELIVERED (FREIGHT INCLUDED IN PRICE)