

DATE: 12/22/2020

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00133181

JEFFERSON PARISHPURCHASING DEPARTMENT
P.O. BOX 9
GRETN, LA. 70054-0009
504-364-2678

VENDOR: Interboro Packaging Corp.

BUYER: MBUTTERY

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

7-10 Days ARO!

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

N/A

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

N/A

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: 1

NUMBER: _____

NUMBER: _____

NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) N/A***** ALL BIDDERS MUST COMPLETE SECTION BELOW *****

FIRM NAME:

Interboro Packaging Corp.

SIGNATURE:

(Must be signed here)



TITLE:

Secretary

PRINT OR TYPE NAME:

Toby Einhorn

ADDRESS:

114 Bracken Road

CITY, STATE:

Montgomery, NY

ZIP:

12549

TELEPHONE:

(845)782-6800

FAX:

(845) 781-2450

EMAIL ADDRESS:

Abraham@interboropackaging.com

TOTAL PRICE OF ALL BID ITEMS: \$ 3,640.50

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00133181

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|---|---|------------|
| 1 | 10.00 | CS | THIRTEEN (13) MONTH CONTRACT FOR THE SUPPLY OF DISPOSABLE GLOVES ON AN AS NEEDED BASIS FOR ALL JEFFERSON PARISH DEPARTMENTS 0010 - BOUFFANT DISPOSABLE CAPS 1000/CS BRAND: JOHNSON PRODUCT NO. JW-6524GR COLOR: GREEN PACK: 1000/CS | | |
| 2 | 10.00 | CS | 0020 - NON-STERILE DISPOSABLE GLOVES LATEX-FREE, POWDER FREE, VINYL SMALL, MEDIUM, LARGE AND X-LARGE 100/BX, 10 BX/CS INTERPLAST PACK 10/100 IG-VF001SM IG-VF002MED IG-VF003LARGE IG-VF004XLARGE | \$137.80 | \$1,378.00 |
| 3 | 10.00 | CS | 0030 - GLOVES, SMALL, FOOD SERVICE DISPOSABLE, CLREA POLYETHYLENE, POWDER FREE, 100/BX, 10 BOX/CS BRAND: INTERPLAST PRODUCT NO. IG-GL-SMALL | Med Pride-Sm, Med, Lrg, XL-VPFG 1,000/Case \$18.75 | \$187.50 |
| 4 | 10.00 | CS | 0040 - GLOVES, MEDIUM FOOD SERVICE DISPOSABLE, CLREA POLYETHYLENE, POWDER FREE 100/BOX, 10 BOX/CS BRAND: INTERPLAST PRODUCT NO. IG-GL-MEDIUM SIZE: MEDIUM 10/100 | Elara/JobGuard-Sm-PG 1,000/Case \$18.75 | \$187.50 |
| 5 | 10.00 | CS | 0050 - GLOVES, LARGE, FOOD SERVICE DISPOSABLE, CLEAR POLYETHYLENE, POWDER FREE, 100/BX 10 BX/CS BRAND: INTERPLAST PRODUCT NO. IG-NFX5001 PACK: 100 | Elara/JobGuard-Med-PG 1,000/Case \$18.75 | \$187.50 |
| 6 | 10.00 | BX | 0060 - GLOVES, BLUE NITRILE, X-SMALL DISPOSABLE, AMBIDEXTROUS, TEXTURED, 6MIL 9 1/2 INCH LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX AMBITEX | Elara/JobGuard-Lrg-PG 1,000/Case \$42.50 | \$425.00 |
| | | | | Med Pride/Safeko/Superb-XS-NPFG 100/Box Our gloves are 5 Mil. | |

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00133181

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|--|----------|-----|---|----------------------|----------|
| 7 | 10.00 | BX | BRAND: INTERPLAST PRODUCT NO.: IG-NVX5001 PACK: 100 0070 - GLOVES, BLUE NITRILE, SMALL DISPOSABLE, AMBIDEXTROUS, TEXTURED, 6 MIL., 9 1/2 INCH LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX AMBITEX BRAND: INTERPLAST PRODUCT NO.: IG-NF201 PACK: 100 | \$42.50 | \$425.00 |
| 8 | 10.00 | BX | 0080 - GLOVES, BLUE NITRILE, X-LARGE DISPOSABLE, AMBIDEXTROUS, TESTURED, 6 MIL., 9 1/2 INCH LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX AMBITEX BRAND: INTERPLAST PRODUCT NO.: IG-NF204 PACK: 100 | \$42.50 | \$425.00 |
| 9 | 10.00 | BX | 0090 - GLOVES, BLUE NITRILE, LARGE DISPOSABLE, AMBIDEXTROUS, TESTURED, 6 MIL., 9 1/2 INCH LENGTH, POWDER FREE 100 GLOVES PER DISPENSER BOX BRAND: INTERPLAST PRODUCT NO.: IG-NF203 PACK: 100 | \$42.50 | \$425.00 |
| Samples are available upon request! | | | | | |



May 7, 2014

File ID: 46266

Mrs. Edith Jeremias
Interboro Packaging Corporation
114 Bracken Road
Montgomery, NY 12549

Dear Mrs. Edith Jeremias:

The New York State Department of Economic Development, Division of Minority and Women's Business Development (DMWBD) has determined that your firm, Interboro Packaging Corporation, continues to meet eligibility requirements for re-certification, pursuant to Executive Law, Article 15-A and 5NYCRR Section 140 through 145 of the Regulations.

Therefore, we are pleased to inform you that your firm, has once again, been granted status as a **Women Business Enterprise (WBE)**. Your business will continue to be listed in the State's Directory of Certified Businesses with codes listed on the following page.

This Certification remains in effect for a period of generally three (3) years from the date of this letter or until such time as you are selected again, by this office for re-certification. Any changes in your company that affect ownership, managerial and/or operational control, must be reported to this Office within thirty (30) days of such changes; including changes to company name, business address, telephone numbers, principal products/services and bonding capacity.

The Certification status is not intended to imply that New York State guarantees your company's capability to perform on contracts, nor does it imply that your company is guaranteed any State business.

Thank you for your cooperation. On behalf of the State of New York, I wish you luck in your business endeavors, particularly those involving State agencies.

Yours sincerely,

Scott Munson
Director of Certification

**Department of Purchasing & Contract Compliance**

Mario Avery, MBA, MCA
Contract Compliance Administrator

Suite 1168
130 Peachtree Street, S.W.
Atlanta, GA 30303
www.fultoncountyga.gov

Main: (404) 612-6300

September 17, 2020

Mrs. Edith Jeremias
Interboro Packaging Corp.
114 Bracken Road
Montgomery, NY 12549-2600

Dear Mrs. Jeremias:

The Fulton County Office of Contract Compliance has reviewed your application for Minority/Female Business Enterprise ("MFBE") recertification. Based on our evaluation of the information submitted, your firm has met the requirements for certification renewal.

Your firm's certification will last for a period of two (2) years beginning with the effective date of this letter. You may apply for recertification as a MFBE three months prior to the certification expiration date. Failure to recertify your company within six (6) months after certification has expired will require your company to repeat the certification process in its entirety. If at any time during your certification period there is a change in management, ownership or control of your firm, you are required to update your firm's profile. If your firm relocates during the certification period please update your profile as well. Failure to maintain accurate information on your firm may result in removal of your firm from the Minority/Female Business Enterprise (MFBE) Directory.

If you have any questions or require further assistance, please feel free to contact our office at (404) 612-6300. We wish you continued success in your business endeavors.

Sincerely,

Mario Avery
Contract Compliance Administrator



South Central Texas Regional Certification Agency

“Increasing economic prosperity by creating opportunities and
eliminating barriers”

www.sctrca.org

March 18, 2019

Edith Jeremias
Interboro Packaging Corp.
114 Bracken Road
Montgomery, NY 12549-2600

Dear Edith Jeremias:

We are pleased to inform you that your application for certification in our Small, Minority, Woman and Veteran Business Enterprise (S/M/W/V) Program has been approved. Your firm met the requirements of the SCTRCA Policy and Procedure Manual and is currently certified as a:

***ESBE SBE WBE**

Certification Number: 219039500
Certification Expiration: March 31, 2021

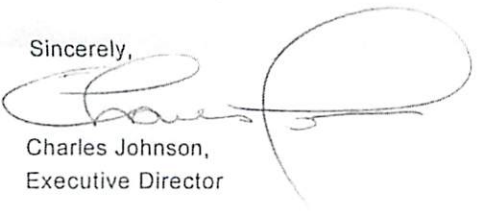
Providing the following products or services:

NAICS 423450: MEDICAL, DENTAL, AND HOSPITAL EQUIPMENT AND SUPPLIES MERCHANT WHOLESALERS
NAICS 423850: SERVICE ESTABLISHMENT EQUIPMENT AND SUPPLIES MERCHANT WHOLESALERS

On the two year anniversary date of your certification, you are required to provide a renewal application affirming that no changes have occurred affecting your certification status. The SCTRCA will send you a Certification Renewal reminder sixty (60) days prior to your expiration date. The SCTRCA will no longer include a certificate upon certification renewals. Your expiration date is March 31, 2021.

Please notify this office within thirty (30) days of any changes affecting the size, ownership, control requirements, or any material change in the information provided in the submission of the certification application. Thank you in advance.

Sincerely,


Charles Johnson,
Executive Director

***MINUTES OF THE
BOARD OF DIRECTORS MEETING
OF
Interboro Packaging Corporation***

A regular meeting of the Board of Directors of the above corporation was held on June 1, 2020 at 12:00 Noon at the corporation's place of business.

The purpose of the meeting: To authorize to sign bids and execute contracts to all Public Bidding of the said corporation all documents necessary, including signing bids and contracts on behalf of the said corporation. Also to set forth executive authority.

- I. QOURUM.** A quorum was declared present based on the presence of the following directors: Abraham Jeremias and Edith Jeremias and the following Shareholders who were present or Represented by proxy as follows:

-Shareholder: Edith Jeremias
Number of Shares: 120
The Shareholder was represented in person.

-Shareholder: Abraham Jeremias
Number of Shares: 80
The Shareholder was represented in person.

The following corporate actions were taken by appropriate motions duly made, seconded, and adopted by the unanimous vote of the Directors and Shareholders entitled to vote (unless a higher voting approval is stated.)

- II. APPROVAL OF ACTIONS SECTION.** The actions and undertakings of the Directors, Officers, Employees, and Agents of the corporation were approved with respect to:

- All actions subsequent to the last meeting of the Board of Directors and Shareholders.
- Compensation paid to the Officers during the past year.

- III. AUTHORIZATIN OF CORPORATE ACTION.** Effective immediately, the President or Chief Executive Officer, whoever holds this position, within the authority granted to her under, and in accordance with the provisions of, this Resolution, shall have the full and exclusive right to manage and control the business and affairs of the Corporation and to make all decisions regarding the business of the Corporation and shall have all of the rights, powers and obligations unilaterally, without any other corporate member's consent, in accordance to the laws of the State of New York. Any person that acts in the capacity as the President or Chief Executive Officer, whoever holds this position, shall sign, on behalf of the Corporation, any bank checks or withdrawal orders, stock and bond powers, tax returns, elections, notices, waivers, consents, contracts, Resolutions, deeds, mortgages or any other documents of instruments.

- IV. In order to expedite the handling of the Corporation's business and affairs, it is understood that any document executed by the President or CEO while acting in the name and on behalf of the Corporation shall be deemed to be the action of the Corporation as to any third parties.
- V. **Authority of the President or CEO** In addition to any other rights and powers which the President or CEO may possess under this Resolution and pursuant to the Corporation Act, the President or CEO shall, except to the extent otherwise provided herein, have all specific rights and powers required or appropriate to the management of the Corporation business which, by way of illustration but not by way of limitation, may include the following rights and powers:
- (i) to execute, in furtherance of any and all of the purposes of the Corporation, any and all Resolutions, contracts, documents, certifications, and other instruments deemed by the President or CEO to be necessary or appropriate in connection with the business of the Corporation;
 - (ii) to protect and preserve the title and interest of the Corporation with respect to the assets of the Corporation, to collect all amounts due to the Corporation and otherwise to enforce all rights of the Corporation, and in that connection to retain counsel and institute suits or proceedings in the name and on behalf of the Corporation;
 - (iii) to the extent that funds of the Corporation are available, to pay all debts and obligations of the Corporation and to make all distributions periodically to the Partners in accordance with the provisions of this Resolution;
 - (iv) to open separate bank accounts for the Corporation with such bank or banks as the President or CEO may from time to time select, and to designate and change signatories on such accounts;
 - (v) to employ on behalf of the Corporation such persons as the President or CEO shall deem advisable in the operation and management of Corporation business, including, without limitation, accountants, attorneys, appraisers, brokers and other experts, on such terms and for such reasonable compensation as the President or CEO shall consider advisable;
 - (vi) to advance funds to the Corporation;
 - (vii) to invest and reinvest in stocks, bonds, puts, calls, options, notes or other evidences of indebtedness or ownership (including but not limited to shares in investment trusts), whether unsecured or secured by mortgages on real or personal property wherever situated or other securities or investments and in any property, real or personal, foreign or domestic;
 - (viii) to acquire, hold, sell, transfer, assign, mortgage, lease or otherwise deal with any real, personal or mixed property, interest therein or appurtenance thereto;
 - (ix) to sell, convert, redeem, exchange, mortgage or otherwise dispose of, any real or personal property, at public or private sale, for cash or upon credit, with or without security;
 - (x) to borrow money and, if security is required therefor, to mortgage or subject to any other security device any portion of the assets of the Corporation, to obtain replacements of any mortgage or other security device, and to prepay, in whole or in part, refinance, increase, modify, consolidate or extend any mortgage or other security device; and
 - (xi) to purchase, at Corporation expense, liability and other insurance to protect the Corporation business and property.

VI. AUTHORIZATION OF CORPORATE ACTION. The Officers and Directors have authorized the following secretaries to take the necessary actions and to sign all public bids and contracts reasonably needed to Execution of bid and contracts.

1. Abraham Jeremias, Vice President, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Abraham Jeremias shall be binding upon the said corporation as its own acts and deeds.
2. Rachel Loeb, Board Secretary, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Rachel Loeb shall be binding upon the said corporation as its own acts and deeds.
3. Idy Grunhut, Bid Clerk, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Henny Kohn shall be binding upon the said corporation as its own acts and deeds.
4. Chaim Bittman, Treasurer, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Chaim Bittman shall be binding upon the said corporation as its own acts and deeds.
5. Miriam Berger Secretary, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Miriam Berger shall be binding upon the said corporation as its own acts and deeds.
6. Frady Mendlowitz, Secretary, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Frady Mendlowitz shall be binding upon the said corporation as its own acts and deeds.
7. Mayer Jeremias, Secretary, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Mayer Jeremias shall be binding upon the said corporation as its own acts and deeds.
8. Toby Meisels, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Toby Meisels shall be binding upon the said corporation as its own acts and deeds.
9. Blimie Itzkowitz, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Blimie Itzkowitz shall be binding upon the said corporation as its own acts and deeds.
10. Toby Einhorn, is hereby authorized to execute of behalf of the said corporation all documents necessary, sign bids and contract with governmental agencies, as state, counties, cities, school districts, towns and colleges, and that the documents signed by Toby Einhorn shall be binding upon the said corporation as its own acts and deeds.

There being no further business, the meeting was duly adjourned.



Edith Jeremias
Chairperson of the Board

October 28, 2020

Date

Request for Taxpayer Identification Number and Certification

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

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

Print or type.
See Specific Instructions on page 3.

| | | |
|---|---|--|
| 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Interboro Packaging Corp. | | |
| 2 Business name/disregarded entity name, if different from above | | |
| 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> 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 FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small> | |
| 5 Address (number, street, and apt. or suite no.) See instructions. 114 Bracken Road | Requester's name and address (optional) | |
| 6 City, state, and ZIP code Montgomery, NY 12549 | | |
| 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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

| | | | | | | | | | | | |
|--------------------------------|---|--|--|---|---|---|---|---|---|---|---|
| Social security number | | | | | | | | | | | |
| | | | | - | | | | - | | | |
| or | | | | | | | | | | | |
| Employer identification number | | | | | | | | | | | |
| 1 | 1 | | | - | 2 | 6 | 3 | 3 | 5 | 4 | 1 |

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 ► 12-29-20 |
|-----------|--|-----------------|

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.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



INTER-7

OP ID: PH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/02/2020

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 Global Underwriters Agency PO Box 4987 Clifton Park, NY 12065 William P Kloc | 518-877-8623 | CONTACT NAME: William P Kloc PHONE (A/C, No, Ext): 518-877-8623 FAX (A/C, No): 518-877-8820 E-MAIL ADDRESS: |
| INSURED Interboro Packaging Corp Northvale Property Assoc LLC 114 Bracken Road Montgomery, NY 12549-2600 | | INSURER(S) AFFORDING COVERAGE INSURER A: Regent Insurance Company INSURER B: General Casualty Co of WI INSURER C: INSURER D: INSURER E: INSURER F: |
| | | NAIC # 24449 24414 |

COVERAGES

CERTIFICATE NUMBER:

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 | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | X | | CCI1355833 | 02/04/2020 | 02/04/2021 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | CCI1355833 | 02/04/2020 | 02/04/2021 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| B | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000 | | | CCU1355833 | 02/04/2020 | 02/04/2021 | EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 |
| | 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/A | | | | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$ |
| A | Property | | | CCI1355833 | 02/04/2020 | 02/04/2021 | Bldg 7,150,000 BPP 4,500,000 |

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

CERTIFICATE HOLDER

CANCELLATION

JEFFEG3

Jefferson Parish
200 Derbigny St
Gretna, LA 70053

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

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE



SCAN TO VALIDATE
AND SUBSCRIBE

***** 112633541
INTERBORO PACKAGING INC
114 BRACKEN ROAD
MONTGOMERY NY 12549

| | | | |
|--|------------------------------|---|-------------------|
| POLICYHOLDER INTERBORO PACKAGING INC 114 BRACKEN ROAD MONTGOMERY NY 12549 | | CERTIFICATE HOLDER 50-132991 JEFFERSON PARISH 200 DERBIGNY STREET SUITE 4400 GRETN LA 70053 | |
| POLICY NUMBER W 996 648-2 | CERTIFICATE NUMBER 859465 | POLICY PERIOD 01/03/2020 TO 01/03/2021 | DATE 12/3/2020 |

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 996 648-2, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW, AND, WITH RESPECT TO OPERATIONS OUTSIDE OF NEW YORK, TO THE POLICYHOLDER'S REGULAR NEW YORK STATE EMPLOYEES ONLY.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT [HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP](https://www.nysif.com/cert/certval.asp). THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 892237479



For Item #2

Shield Line

MATERIAL SAFETY DATA SHEET

12/27/2013

1 Identification of the substance/preparation

.Product details

.Trade name: PVC Glove

.Trade code: S#,M#,L#XL#

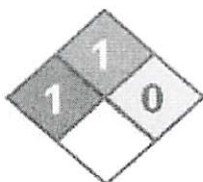
2 Composition/information on ingredients

.Description: Mixture of substances listed below with additions.

| <i>.Components Number:</i> | <i>CAS Number</i> | <i>Weight Percent (%)</i> |
|---|-------------------|---------------------------|
| <i>Polyvinyl chloride</i> | <i>9002-86-2</i> | <i>53%</i> |
| <i>Dinonyl phthalate</i> | <i>84-76-4</i> | <i>42%</i> |
| <i>Water soluble polyurethane resin</i> | <i>67700-43-0</i> | <i>3%</i> |
| <i>Ca-Zn stabilizer</i> | <i>-- -- --</i> | <i>1%</i> |

3 Hazards identification

.NFPA ratings (scale 0 - 4)



Health = 1; Fire = 1; Reactivity = 0

.HMIS-ratings (scale 0 - 4)

| | |
|-------------------|----------|
| HEALTH | 1 |
| FIRE | 1 |
| REACTIVITY | 0 |

Health = 1; Fire = 1; Reactivity = 0



Shield Line

.Emergency Overview: Irritating vapors to respiratory system and eyes may form when polymer is processed at high temperatures. Molten or heated material in skin contact can cause severe burns.

.Routes of Entry: FOR HOT MATERIAL: Skin contact, Eye contact, Inhalation.

.Potential Acute Health Effects:

.Eyes: Slightly hazardous by the following route of exposure: of eye contact (irritant). Heated Polymer: Eye contact can cause serious thermal burns. Vapors formed when polymer is heated may be irritating to the eye.

.Skin: No known acute effects of this product resulting from skin contact. However, in light of good industrial hygiene, exposure to any chemical should be kept to a minimum.

Heated Polymer: skin contact can cause serious thermal burns.

.Inhalation: Negligible at room temperature. Nuisance dusts can be irritating to the upper respiratory tract. Irritating vapors may form when the polymer is processed at high temperatures.

.Ingestion: No effects are expected for ingestion of small amounts. May be a choking hazard.

.Potential Chronic Health Effects:

.CARCINOGENIC EFFECTS: Polypropylene is not a known carcinogen. Classified NONE by NTP, NONE by OSHA, 3 (Not classifiable for humans) by IARC.

.MUTAGENIC EFFECTS: Not available.

.TERATOGENIC EFFECTS: Not available.

.Medical Conditions Aggravated by Overexposure: There is no known effect from chronic exposure to this product. Repeated or prolonged exposure is not known to aggravate any medical condition.

.Overexposure/ Signs/ Symptoms: No information available.

4 First aid measures

.After inhalation: The material is not expected to present an inhalation hazard..

.After skin contact: Cool skin rapidly if contacted with molten polymer. Obtain medical attention for thermal burns..

.After eye contact: Immediately flush eyes with plenty of water for at least 15 minutes, occasionally lifting the upper and lower eyelids. Get medical aid immediately.

.After swallowing: If symptoms persist consult doctor.

. Ingestion: No adverse health effects expected from ingestion..

.After first aid, get appropriate in-plant , paramedic, or community medical support.



Shield Line

5 Fire-fighting measures

.General Information: As in any fire, wear a self-contained breathing apparatus in pressure-demand, MSHA/NIOSH (approved or equivalent), and full protective gear. Decomposes at high temperatures, resulting in toxic and corrosive products. Containers may explode when heated.

.Extinguishing Media: Use water spray, dry chemical, carbon dioxide, or chemical foam. Cool containers with flooding quantities of water until well after fire is out.

.Flash Point: Not available.

.Auto ignition Temperature: > 650F (estimated).

.LEL: Not Determined.

.UEL: Not Determined.

.Special fire & explosion hazards: Dense smoke emitted when burned without sufficient oxygen. Possible dust explosion if fines accumulate. Wear standard fire fighting attire.

.Exting using media: Dry Chemical, Carbon Dioxide, and Foam.

.Unusual Fire or Explosion Hazards: None.

6 Accidental release measures

.Small Spill and Leak: Good housekeeping must be maintained at all times to avoid this hazard. Sweep, shovel, or vacuum material into clean containers.

.Large Spill and Leak: Use a shovel to put the material into a convenient waste disposal container.

7 Handling and storage

.Handling: Handling of plastic may form nuisance dust. Protect personnel.

Pneumatic material handling and processing equipment may generate dust of sufficiently small particle size that, when suspended in air, may be explosive. Dust accumulations should be controlled through a comprehensive dust control program that includes, but is not limited to, source capture, inspection and repair of leaking equipment, routine housekeeping and employee training in hazards. See NFPA 654.

.Storage: Keep container dry. Keep in a cool place. Ground all equipment containing material. Combustible materials should be stored away from extreme heat and away from strong oxidizing agents.



Shield Line

8 Exposure controls/personal protection

.Ventilation and Engineering controls:

No special ventilation and engineering controls are required for handling of these products.

.Respiratory Protection:

No special respiratory protection is required for use of these products. If respiratory protection is needed, use only protection authorized in the U.S. Federal OSHA Standard, applicable U.S. State regulations, or the Canadian CSA standard.

.Body Protection:

No special protective clothing is required.

.Protective Gloves:



Protective Gloves

Rubber or plastic acid-resistant gloves with elbow-length gauntlet.

.Eye Protection:



Tightly sealed goggles

Chemical goggles or face shield.



Shield Line

9 Physical and chemical properties

.General Information

| | |
|---------------|-----------------|
| <i>Form:</i> | <i>Solid</i> |
| <i>Color:</i> | <i>Cream</i> |
| <i>Odor:</i> | <i>Odorless</i> |

.Change in condition

| | |
|---------------------------------------|---|
| <i>Melting point/Melting range:</i> | <i>Not available</i> |
| <i>Boiling point/Boiling range:</i> | <i>Not available</i> |
| <i>Flash point:</i> | <i>Not applicable</i> |
| <i>Self-igniting:</i> | <i>Product is not self-igniting</i> |
| <i>Danger of explosion:</i> | <i>Product does not present an explosion hazard</i> |
| <i>Density:</i> | <i>Not determined</i> |
| <i>Relative density:</i> | <i>Not available</i> |
| <i>Vapor density:</i> | <i>Not available</i> |
| <i>Evaporation rate</i> | <i>Not Applicable</i> |
| <i>Solubility in/Miscibility with</i> | |
| <i>Water:</i> | <i>Not miscible or difficult to mix</i> |
| <i>PH-Value:</i> | <i>Not available</i> |
| <i>Viscosity:</i> | |
| <i>Dynamic:</i> | <i>Not available</i> |

10 Stability and reactivity

.Chemical Stability: The product is stable.

.Conditions to Avoid: Dust generation.

.Incompatibilities with Other Materials: Incompatible or reactive with fluorine gas, oxidizing agents (nitric acid and perchloric acid), free halogens, benzene, petroleum ether, gasoline and lubricating oils, and aromatic and chlorinated hydrocarbons.

.Hazardous Decomposition Products: The following combustion products may be generated: carbon dioxide, carbon monoxide, water vapor, and trace volatile organic compounds.

.Hazardous Polymerization: Hazardous polymerization will not occur.



Shield Line

11 Toxicological information

.Toxicity to Animals:

LD50: Not available.

LC50: Not available.

.Chronic Effects on Humans: CARCINOGENIC EFFECTS: Classified NONE by NTP, NONE by OSHA. 3 (Not classifiable for human.) by IARC.

.Other Toxic Effects on Humans: None

.on the skin: Irritant to skin and mucous membranes if soluble

.on the eye: Sensitizing effects known.

.Carcinogenicity: None Determined.

.Mutagenicity: None Determined.

.Teratogenicity: None Determined.

12 Ecological information

.Instability: Not applicable.

.Persistence/Degradability: Like plastic in the long term.

.Environmental Precautions: It must be disposed of by incineration or in an authorized waste deposit.

13 Disposal considerations

.Product: Must be disposed of in accordance with applicable Federal, state and local regulations.

.Recommendation

Must not be dispose together with household garbage. Do not allow product to reach sewage system.

.Uncleaned packaging: Recommendation Disposal must be made according to official regulations.



Shield Line

14 Transport information

- .DOT Classification for Bulk Shipments (non bulk shipments may differ): Not a DOT controlled material (United States).*
- .DOT Proper Shipping Name: Not applicable.*
- .UN Number: Not applicable.*
- .Packing Group: Not applicable.*
- .USCG Proper Shipping Name: PVC glove*
- .Marine Pollutant: Not available.*
- .Hazardous Substance Reportable Quantity: Not available.*
- .Special Provisions for Transport: Not applicable.*
- .TDG Classification: Not controlled under TDG (Canada).*
- .ADR/RID Classification: Not controlled under ADR(Europe)*
- .IMO/IMDG Classification: Not Controlled under IMDG.*
- .ICAO/IATA Classification: Not controlled under IATA.*

15 Regulatory information

- .HCS Classification: This product is not a "Hazardous Chemical" as defined by the OSHA Hazard Communication Standard, 29 CFR 1910.1200.*
- .U.S. Federal Regulation:*
- .TSCA inventory: All components are listed or exempted.*
- .SARA 301/302/303*
No chemicals in this product are listed as extremely hazards substances in 40 CFR 355, Emergency Planning And Notification (Appendix A to Part 355).
- .SARA 304: No chemicals in this product require reporting under the requirement of 40 CFR 355, Emergency Planning And Notification (SARA extremely hazardous substances listed in Appendix A to Part 355 or CERCLA hazardous substances listed in Table 302.4 of 40 CFR Part 302).*
- .SARA 313: This product contains no chemicals in excess of the applicable de minimis concentration that are subject to the reporting requirements of section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR Part 372 (Table 372.65).*



Shield Line

.SARA 311/312: This product is not a "Hazardous Chemical" as defined by the OSHA Hazard Communication Standard, 29 CFR 1910.1200, and as such does not require reporting under the requirements of 40 CFR 370, Hazardous Chemical Reporting: Community Right-To-Know.

Specific state and local regulations should be consulted to determine if there are any additional requirements. Because many states and localities have added requirements or incorporated the Federal contents in their own forms, Tier I & II forms should be obtained from the State Emergency Response Commission (SERC).

Clean water act (CWA) 307: No products were found.

Clean water act (CWA) 311: No products were found.

Clean air act (CAA) 112 accidental release prevention: No products were found.

Clean air act (CAA) 112 regulated flammable substances: No products were found.

Clean air act (CAA) 112 regulated toxic substances: No products were found.

.International Regulations

.WHMIS: Not controlled under WHMIS

.EINECS: Not available.

.DSCL: Not controlled under DSCL

.International Lists: No products were found.

.State Regulation: No product were found. California Prop. 65: There are no Proposition 65 chemicals present in our polypropylene resins at levels that would require a warning under the California Safe Drinking Water and Toxic Enforcement Act.

16 Other information

The contents and format of this MSDS are in accordance with EEC Commission Directive 2001/58/EC, 1999/45/EC, 1967/548/EEC.

DISCLAIMER OF LIABILITY

The information in this MSDS was obtained from sources which we believe are reliable. However, the information is provided without any warranty, express or implied, regarding its correctness. The conditions or methods of handling, storage, use or disposal of the product are beyond our control and may be beyond our knowledge. For this and other reasons, we do not assume responsibility and expressly disclaim liability for loss, damage or expense arising out of or in any way connected with the handling, storage, use or disposal of the product. This MSDS was prepared and is to be used only for this product. If the product is used as a component in another product, this MSDS information may be applicable.

For Item # 3, 4 & 5




Technical Data Sheet

Easygrip™ Cast Poly Gloves

| PRODUCT INFORMATION | | | | | | | |
|---------------------|---------|----------|--------|----------|----|----|--------|
| Item # | Size | Type | Pack | Case Wt. | Ti | Hi | Pallet |
| FCPT101 | Small | Textured | 10/100 | 4.60 | 16 | 6 | 96 |
| FCPT102 | Medium | Textured | 10/100 | 5.04 | 16 | 6 | 96 |
| FCPT103 | Large | Textured | 10/100 | 5.24 | 16 | 6 | 96 |
| FCPT104 | X-Large | Textured | 10/100 | 5.74 | 16 | 6 | 96 |
| FCPT101 | UniSize | Textured | 10/100 | 4.60 | 16 | 6 | 96 |

| PRODUCT DESCRIPTION | |
|---------------------|--|
| Product | Easygrip™ Cast Poly Gloves |
| Material | Virgin Low Density Polyethylene (LDPE), Cast Extruded |
| Color | Clear |
| Surface | Textured |
| Interior | N/A |
| Glove Design | Ambidextrous |
| Cuff | Straight |
| Pack | 100 gloves per dispenser box, 10 boxes/case (1,000 gloves) |
| Food Contact | Comply with FDA CFR177.1520 for repeat use in contact with food. |
| Melt Point | 200°F/93.3°C |

| TECHNICAL INFORMATION | | | | | |
|--------------------------|---|----------|----------|-------------|-------------|
| Size: | Small | Medium | Large | Extra Large | Test Method |
| Weight (grams) | 1.3 | 1.5 | 1.6 | 1.8 | |
| Length (mm) | 270 | 285 | 285 | 285 | ASTM D 3767 |
| Width (mm) | 108 | 114 | 121 | 140 | ASTM D 3767 |
| Thickness (mm/mils) | | | | | |
| Finger | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | ASTM D 3767 |
| Palm | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | ASTM D 3767 |
| Cuff | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | 0.03/1.2 | ASTM D 3767 |
| Barrier Performance | | | | | |
| AQL | 2.5 | 2.5 | 2.5 | 2.5 | ASTM D 7246 |
| Max Force at Yield (N/m) | 360 min | 360 min | 360 min | 360 min | ASTM D 882 |
| Ultimate Elongation | 300% min | 300% min | 300% min | 300% min | ASTM D 882 |
| Powder Content | | | | | |
| Powder | N/A | | | | |
| Powder Free | <2.0 mg/glove per glove | | | | ASTM D 6124 |
| Protein Level | 100% latex free. Contains no natural rubber latex proteins. | | | | |

| MANUFACTURING COMPLIANCE | |
|---|---|
|  | Gloves are manufactured under FDA-mandated Good Manufacturing Practices (GMP)/Quality System Regulation requirements (QSR), ISO9001 and ISO13485 standards. |

Specifications subject to manufacturing tolerances

for Item # 3, 4, & 5

The right solution for every job



Jobguard®

Jobguard® Poly Gloves

Jobguard® Vinyl Multi-Purpose Gloves

Jobguard® Blue Vinyl Multi-Purpose Gloves

Jobguard® Stretch Vinyl Multi-Purpose Gloves

Jobguard® Nitrile Multi-Purpose Gloves

Jobguard® XM Latex Multi-Purpose Gloves

firstcare®

firstcare® Vinyl Examination Gloves

firstcare® Stretch Vinyl Examination Gloves

firstcare® Nitrile Examination Gloves

firstcare® Latex Examination Gloves



providing comfort and peace of mind...
on budget, on time

Spring-Fill Industries Poly Gloves

2855 Shermer Road, Northbrook, IL 60062 U.S.A.

www.spring-fillgloves.com fax: 847-205-1710

000 225 2275 (USA/Can) 847 205 1975 (International)

Protection Without Compromise

Jobguard[®] poly

food service gloves



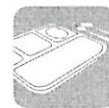
deli



restaurant



food prep



cafeteria



bakery



agriculture

Snapshots of some potential Jobguard[®] Poly users* at work:

- A fast food worker makes hamburgers to go.
- A product demonstrator sets up a tray of food samples.
- A supermarket seafood clerk wraps up a fresh salmon filet.

When a job requires the safe, healthful execution of repetitive tasks, you need Jobguard[®] Poly.

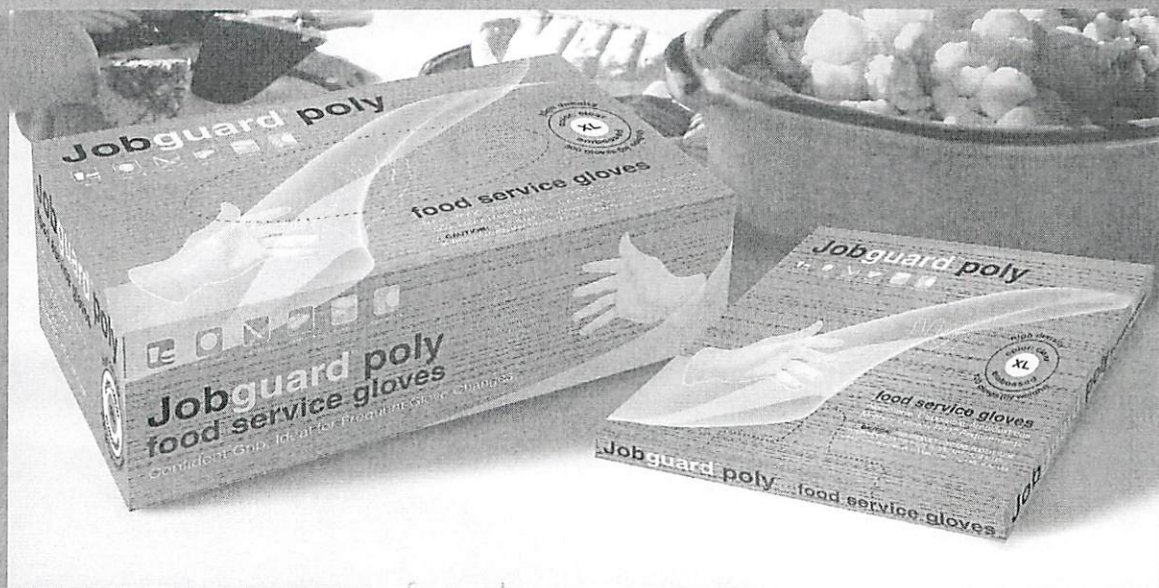
A light and quick-donning glove, Jobguard[®] Poly is the solution for maintaining clean, safe work environments. Its formulation of Polyethylene performs dependably, protecting products and substances that must be handled during consistent, hygienic procedures. Its material gauge strikes just the right balance between touch sensitivity and effective barrier protection. And its loose-fitting form factor is designed for rapid donning and removal. Workers get their hands covered quickly, so safe and sanitary tasks become second nature. For all the manual procedures that need to be accomplished repeatedly with speed and safety, Jobguard[®] Poly has success at hand.

* Please consult your company policy to determine the appropriate glove for a given application.



TDO:TESTED Like every Spring-Fill Industries glove, Jobguard[®] Poly is manufactured using Test-Driven OptimizationSM, our system of exacting specifications, ensuring our formulation of Polyethylene provides the perfect balance of safety with ease of use.

Jobguard® food service poly gloves



food service

embossed

Confident Grip, Economical, Ideal for Frequent Glove Changes

Jobguard® Poly Embossed is the quick-donning light glove solution designed for the safe and healthful execution of repetitive tasks with the best possible grip. Like every Spring-Fill Industries glove, Jobguard® Poly is manufactured using Test-Driven OptimizationSM, our system of exacting specifications, ensuring our formulation of polyethylene provides the perfect balance of safety with ease of use. And, the embossed texture means extra confidence for tasks where precision makes a difference.

For work environments where product safety, confident grip, and efficient manual barrier protection are paramount, Jobguard® Poly Embossed has you covered.

CHARACTERISTICS:

| | |
|------------|--|
| MATERIAL: | POLYETHYLENE (100% LATEX FREE) |
| TYPE: | NON-STERILE |
| USAGE: | FOR SINGLE USE ONLY |
| SHAPE: | AMBIDEXTROUS |
| COLOR: | CLEAR |
| STANDARDS: | MEETS OR EXCEEDS FDA REQUIREMENTS FOR FOOD CONTACT, ASTM STANDARDS |

EMBOSSED

ORDER INFORMATION POLY FOOD SERVICE GLOVES

ORDER NUMBERS:

| | |
|-------------|-------------|
| SMALL | JGPOLY - S |
| MEDIUM | JGPOLY - M |
| LARGE | JGPOLY - L |
| EXTRA LARGE | JGPOLY - XL |

PACKAGING:

100 GLOVES/DISPENSER (BY WEIGHT)
10 DISPENSERS/INNER CASE
10 INNER CASES/MASTER CASE

ORDER NUMBERS:

| | |
|--------|--------------|
| SMALL | JGP4500 - S |
| MEDIUM | JGP4500 - M |
| LARGE | JGP4500 - L |
| XLARGE | JGP4500 - XL |

PACKAGING:

500 GLOVES/DISPENSER (BY WEIGHT)

Jobguard®

food service poly gloves

food service

Jobguard® Poly is the quick-donning light glove solution designed for the safe, healthful completion of repetitive tasks with the best touch sensitivity. Like every Spring-Fill Industries glove, Jobguard® Poly is manufactured using Test-Driven Optimization™, our system of exacting specifications, ensuring our formulation of Polyethylene provides the perfect balance of safety with ease of use. And the embossed texture means it's a good choice for tasks that would be aided by additional touch sensitivity. For work environments, where product safety, flexibility, and efficient manual barrier protection are paramount, you can depend on Jobguard® Poly.



safety



For nearly two decades, Spring-Fill Industries has been an industry leader in protective packaging solutions, known for our innovative designs, custom manufacturing, and quick lead-times. Safety, productivity, and quality have been organizing principles throughout our history, and we make sure people who use our products derive great value from our single-minded commitment to manufacturing and quality control.

Confident Grip, Economical, Ideal for Frequent Glove Changes

Spring-Fill Industries

Poly Gloves

2855 Shermer Road
Northbrook, IL 60062 U.S.A.
www.spring-fillgloves.com

Phone: 888-335-3275 (USA/Canada)

For Item # 6, 7, 8 & 9



Shield Line

PRODUCT SPECIFICATION

Nitrile Industrial PF

| Small | MPR-50703 |
|---------|-----------|
| Medium | MPR-50704 |
| Large | MPR-50705 |
| X-Large | MPR-50706 |

PRODUCT

Nitrile disposable glove

Industrial grade

Non-sterile

Powder-free

Inner Coating

Textured surface

COUNTRY OF ORIGIN

Thailand

INTENDED USE

This is a disposable product intended for non-medical purposes



Shield Line

FINAL GLOVE RELEASE

Assurance action

ASTM D 4679: "Standard plans and test method for leakage defects: Standard Specification for Rubber Household or Beautician Gloves"

ASTM D 5151: "Standard Test Method for Detection of Holes in Medical Gloves"

Sampling inspection and final release information

Major defects: highest concern non-conformities which prevent correct use of the product. AQL 4.0 (inspection level GI for leaks)

PACKAGING, MARKING, GOOD DELIVERY INSPECTION

Assurance Action

Set-up and patrol inspection at packaging

Supervision of vehicle or vessel loading

GOOD MANUFACTURING PRACTICE

The gloves are manufactured in compliance with ISO 9001 and ISO 13485

MICROBIOLOGICAL CLEANLINESS CONTROL

The bioburdens of the finished gloves are monitored and recorded. Unusual contaminants are identified.

STORAGE

According to ISO 2230 for Vulcanized Rubber

Store in a dry, ventilated area

Avoid direct sunlight, fluorescent lighting, heat, and moisture

Do not store above 100° F (38° C) as this will lead to accelerated aging

Long-term storage can result in pleats and stickiness



Shield Line

MATERIAL

Synthetic nitrile rubber

OUTER SURFACE

Halogenation/siliconization and extensive washing in water

Inside coated with synthetic material

No donning powder used

COMPONENTS

Synthetic rubber nitrile (NBR)

Titanium Oxide

Sulfur

Organic accelerators (dithiocarbamates, benzothiazolate)

Zinc Oxide

Polymeric sterically hindered phenol

Potassium Hydroxide

SHAPE

Straight fingers

Thumb and fingers in one plane

Ambidextrous

CUFF

Beaded (rolled rim)

COLOR

Blue

SIZES

Small (S), medium (M), large (L), extra large (XL)



Shield Line

MARKING

Packaging marked to designated size (gloves not marked)

PACKAGING AND LABELING

Reorder Number MPR 50703 - 50706

100 pieces per box (90 pieces XL), 1,000 pieces per case (900 pieces XL)

CONTROL NUMBER (LOT NO.)

Each packing unit (dispenser box) and outer carton bears a control number

EXAMPLE: 092009 1234 0098

Key: 092009 Production month and year

1234 Internal running order number

0098 Carton number

QUALITY CHARACTERISTICS

All listed standards are used in their latest edition. Current test data on physical properties is available upon request.



Shield Line

| DESCRIPTION | SPECIFICATION | ASSURANCE ACTION |
|---------------------------------------|---|------------------|
| <u>Dimensions</u> | 220 mm min (S) | ASTM D 6319 |
| Overall length | 230 mm min (M, L, XL) | |
| Width | 80 mm +/- 10 mm (S) 95 mm +/- 10 mm (M) 110 mm +/- 10 mm (L) 120 mm +/- 10 mm (XL) | |
| Thickness (single wall) | Finger: 0.05 mm/2.0 mils min. Palm: 0.05 mm/2.0 mils min. | |
| <u>Biocompatibility</u> | | |
| Inside pH | 7.0 +/- 1 | Test method A1 |
| <u>Physical properties</u> | | ASTM D 412 |
| Tensile strength (before/after aging) | 14 MPa min. | |
| Elongation (before aging) | 500% min. | |
| (after aging) | 400% min. | |

*minimum acceptable requirements of ASTM and FDA where applicable. Gloves offered by SHIELD LINE LLC meet or exceed these physical requirements. Independent laboratory test results are available upon request.

PERFORMANCE REQUIREMENTS FOR QUALITY CHARACTERISTICS

For reference purpose in accordance with ISO 2859 "Sampling Procedures for Inspection by Attributes"

INTERNAL ATTRIBUTIVE RELEASE INSPECTION

Sampling for examination in accordance with ISO 2859

Unit for inspection: one (1) glove

If several defects are found on one glove, only the most serious defect (i.e. lowest category) is evaluated

The acceptance criteria is based on the number of defectives observed in a sample

For Item # 6, 7, 8 & 9

SPEC SHEET SK-1021-BL

Safeko®

EXAM GRADE • BLUE • NITRILE



COLOR: BLUE
COLOR: NITRILE
SIZES: S-XL(XXL - SPECIAL ORDER)

PACKAGING: 10X100=1,000(PER CASE)
GRADE: EXAM

LATEX: 100% LATEX FREE
POWDER: FREE
TEXTURED: FINGERS ONLY

| PERFORMANCE | BEFORE AGING | AFTER AGING |
|---------------------|--------------|-------------|
| Elongation at Break | 500% | 400% |
| Tensile Strength | 14 MPA | 14 MPA |



Color shade may vary

| SIZE | PRODUCT # | UPC | REORDER # | GLOVE WEIGHT (GRAMS)* | COUNTRY OF ORIGIN |
|---------|-----------------------|--------------|-----------|-----------------------|--------------------|
| SMALL | SK-1021-NEF-BK-S-100 | 814721014440 | 6088 | 3.1 | CHINA/ MALAYSIA |
| MEDIUM | SK-1021-NEF-BK-M-100 | 814721014457 | 6089 | 3.5 | CHINA/ MALAYSIA |
| LARGE | SK-1021-NEF-BK-L-100 | 814721014464 | 6090 | 3.7 | CHINA/ MALAYSIA |
| X-LARGE | SK-1021-NEF-BK-XL-100 | 814721014471 | 6091 | 3.9 | CHINA/ MALAYSIA |

100% Latex Free

*Glove weight may vary by +/- 0.3 grams

Disclaimer: All information is for reference only, and is subject to change without warning

HNC ENTERPRISES, LLC
10624 Avenue D
Brooklyn, NY 11236
Phone: 866-803-6160
Email: info@safeko.com
www.SAFEKO.com

For Item # 6, 7, 8 & 9



BLUE NITRILE EXAM MEDICAL GRADE CHEMOTHERAPY TESTED POWDER-FREE / TEXTURED 4 - 4.5 mil

Country of Origin: China

© Copyright 2016 Performance Safety Group, Inc.

General Description:

| | |
|--|------------------------------|
| Material: Synthetic Nitrile Rubber (NBR) | Type: Non-Sterile |
| Color: Blue | Usage: Single Use |
| Shape: Ambidextrous | Interior: Powder-Free |
| Sizes: XS-XL | Exterior: Finger Textured |
| Cuff: Beaded | Process: Online Chlorination |

Physical Properties:

| | |
|--------------------------------------|------------------------------|
| Tensile Strength: 14 MPa min | Elongation: 500% |
| Tensile Strength (Aged): 14 MPa min | Elongation (Aged): 400% |
| Powder Content: No Powder Added | Shelf Life: 5 Years |
| FDA Listing: 510(k) Status | Device Listing: upon request |
| Product Standard: ASTM D6319 / EN455 | AQL Level: 1.5 |

Dimensions:

| |
|------------------------------------|
| Weight - X-Small: 2.5 g \pm 3 |
| Small: 2.9 g \pm 3 |
| Medium: 3.2 g \pm 3 |
| Large: 3.5 g \pm 3 |
| X-Large: 4.0 g \pm 3 |
| Thickness - Cuff: .06 mm \pm .02 |
| Palm: .08 mm \pm .02 |
| Finger: .10 mm \pm .02 |
| Width - X-Small: 76 mm \pm 3 |
| Small: 84 mm \pm 3 |
| Medium: 94 mm \pm 3 |
| Large: 105 mm \pm 3 |
| X-Large: 113 mm \pm 3 |
| Length: 240 \pm 5 mm |

Eco-Friendly Packaging:

| |
|---|
| Recycled Box: 100 Gloves per box |
| Box Dims: 240 x 122 x 65 mm |
| Recycled Case: 10 Boxes per case |
| Case Dims: 315 x 250 x 230 mm |
| Boxes & Cases Are Barcoded & Contain Dated Lot Codes for Quality Assurance & Traceability |

Product Codes:

| |
|--|
| CLEAN SAFETY Blue Nitrile Exam PF |
| X-Small: CS4300 |
| Small: CS4301 |
| Medium: CS4302 |
| Large: CS4303 |
| X-Large: CS4304 |

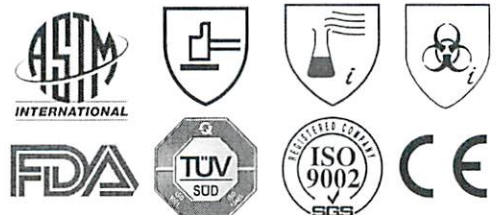


Options:

| |
|----------------------------|
| Lengths: 9.5" (240-245 mm) |
| Finish: Powder-Free |
| Colors: Blue |

Certifications:

Manufactured under GMP, ISO 9001:2008, ISO 13485, Sampling Plan ISO 2859-1, CMDCAS Quality System and conform to International Quality Standards ASTM D6319, D6124, D5151, D6978, D3578, D5712, F1671, EN374, EN455 Part 1 & Part 2, FDA 21CFR 170-199. Tested in accordance with ASTM D6978, Standard Practice for Assessment of Resistance of Medical Gloves to Permeation by Chemotherapy Drugs.



Recommended Uses:



December 29, 2020

Jefferson Parish Purchasing Department
200 Derbigny Street
Suite 4400
Gretna, LA 70053


Bid # 50-133181 Supply of Disposable Gloves

To Whom It May Concern:

It is hereby understood that we are quoting the prices per the unit you have specified in the bid. However, as the table below indicates, we stock some items in a different pack. Therefore, unless you insist on your specified count, we may prefer to ship according to our standard pack. This will only expedite the delivery of your orders. Be advised, however, that we will not deviate without your definite approval.

| Item Number | Standard Pack | Adjusted Price |
|-------------|-------------------------------------|----------------|
| 6 | 100/Box, 10 Boxes/Case = 1,000/Case | \$425.00 |
| 7 | 100/Box, 10 Boxes/Case = 1,000/Case | \$425.00 |
| 8 | 100/Box, 10 Boxes/Case = 1,000/Case | \$425.00 |
| 9 | 100/Box, 10 Boxes/Case = 1,000/Case | \$425.00 |

Sincerely,



Toby Einhorn
Secretary