



Notice of Statewide Contract Award

Official signed contract documents are on file with OMES-Central Purchasing.

Contract Title: Infant/Toddler/Child Products

Statewide Contract # : SW 360

Contract Issuance Date: May 31, 2017

Total Number of Vendors: 3 *(For details see: Vendor Information Sheet)*

Contract Period: May 31, 2017 through May 30, 2018

Agreement Period: May 31, 2017 through May 30, 2022

Authorized Users: **All State Departments, Boards, Commissions, Agencies and Institutions, in addition to Counties, School Districts and Municipalities which may avail themselves of this contract.**

Contract Priority: Non-Mandatory

Type of Contract: Indefinite Quantity, Percentage Discount

OMES-CP Contact: Linda Lechtenberg **Title:** Contracting Officer

Phone: 1 - 405 - 522 - 0436 **Email:** linda.lechtenberg@omes.ok.gov



Awarded Supplier Information

Supplier Name: Evenflo

Supplier ID #: 0000078701

Supplier Address: PO Box 1046

City: Cullman

State: AL

Zip Code: 35056

Contact Person Name: Patsy Pilcher

Phone #: 1-800-768-6077

Title: Account Manager/Contract Manager

Fax #: 1-800-382-4565

Email: evenflosales@worldsafe.net

Website: www.evenflo.com

Authorized Location: ☐ Locations list attached as *(attachment title)*

☐ Address:

City:

State:

Zip Code:

Contract ID #: 4829

Delivery: Standard delivery time is 10 business days ARO.

Minimum Order:

P/Card Accepted: ☒ Yes

☐ No

Other:



Awarded Supplier Information

Supplier Name: Halo Innovations, Inc.

Supplier ID #: 0000340913

Supplier Address: 111 Cheshire Ln, Ste 700 **City:** Minnetonka **State:** MN **Zip Code:** 55305

Contact Person Name: Yvonne Schreifels

Phone #: 1-952-641-5137

Title: Contract Manager

Fax #: 1- - -

Email: yschreifels@halosleep.com

Website: www.halosleep.com

Authorized Location: ☐ Locations list attached as *(attachment title)*

☐ Address:

City:

State:

Zip Code:

Contract ID #: 4832

Delivery: Standard orders are 5-8 business days ARO.

Minimum Order:

P/Card Accepted: ☒ Yes

☐ No

Other:



Awarded Supplier Information

Supplier Name: Tee-Zed Product, LLC dba
Dream Baby

Supplier ID #: 0000433469

Supplier Address: 109 Stuart Town Road

City: Beaufort

State: SC

Zip Code: 29902

Contact Person Name: Eve Miller

Phone #: 1-877-783-0444

Title: Account Manager/Contract Manager

Fax #: 1-800-382-4565

Email: eve@worldsafe.net

Website: www.dream-baby.com

Authorized Location: ☐ Locations list attached as *(attachment title)*

☐ Address:

City:

State:

Zip Code:

Contract ID #: 4833

Delivery: Normal shipping lead time is 3 business days.

Minimum Order:

P/Card Accepted: ☒ Yes

☐ No

Other: