



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

Contract title: Ground Maintenance equipment & services.

Contract Number: SW0196JD

Date of Contract issuance: 03/10/2023

Contract period: 03/10/2023 through 03/09/2024

Agreement period: 03/10/2023 through 03/09/2028

Type of contract: Mandatory Non-Mandatory

OMES Central Purchasing contact: Cini Zacharia, CPOII **Title:** Contracting Officer II

Phone: (405) - 522 - 9078

Email: Cini.zacharia@omes.ok.gov

Supplier name: Deere & Company

Supplier ID #: 0000017530

Contract ID #: 0-6844

Supplier Point of Contact: Tamara Herbert

Supplier address: 21748 Network PL

City: Chicago

State: IL

Zip Code: 60673 - 1217

Phone #: 1 - 919 - 804

- 2862

Email: : GNSBids@JohnDeere.com

Supplier name:

Supplier ID #:

Contract ID #:

Supplier Point of Contact:

Supplier address:

City:

State:

Zip Code:

Phone #: 1 - -

-

Email:

Supplier name:

Supplier ID #:

Contract ID #:

Supplier Point of Contact:

Supplier address:

City: State: Zip Code: -
Phone #: 1 - - Email:

Contract Overview:

**This Statewide Contract resulted from the Solicitation #0900000552 for
SW0196JD, Ground Maintenance equipment & services.**

**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.**

How to order:

- 1. For product and pricing information review awarded contract documents “Attachment Named Exhibit#3&4 Pricing”.**
 - 2. Request a quote from the supplier or any approved authorized dealer listed below. All quotes must reference SW0196JD**
 - 3. Generate a purchase order made payable to the desired supplier. You must reference the statewide contract number SW0196JD on your purchase order by attaching the PeopleSoft Contract.**
 - 4. Email your purchase order to the designated supplier sales representative**
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Available Brands:

Deere & Company

Available Products and Services:

Ground Maintenance equipment & services.

Authorized Dealer/Reseller(s):

Supplier name: NA

Supplier ID #:

Contract ID #:

Supplier Point of Contact:

Supplier address:

City:

State:

Zip Code:

-

Phone #: 1 - - -

Email:

Supplier name:

Supplier ID #:

Contract ID #:

Supplier Point of Contact:

Supplier address:

City:

State:

Zip Code:

-

Phone #: 1 - - -

Email: