<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>ESTIMATED QUANTITY</th>
<th>UNIT OF MEASURE</th>
<th>ITEM</th>
<th>PER UNIT OF MEASURE (In Figures)</th>
<th>TOTAL (ESTIMATED QUANTITY X PER UNIT OF MEASURE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>80</td>
<td>TON</td>
<td>Miscellaneous Scrap Metals at the Carlsbad Maintenance Station per SOW, Exhibit A</td>
<td>111</td>
<td>8880</td>
</tr>
<tr>
<td>2</td>
<td>10,000</td>
<td>POUND</td>
<td>Aluminum, Non-California Redemption Value (CRV) at the Carlsbad Maintenance Station per SOW, Exhibit A</td>
<td>0.65</td>
<td>6500</td>
</tr>
<tr>
<td>3</td>
<td>80</td>
<td>TON</td>
<td>Miscellaneous Scrap Metals at the Escondido Maintenance Station per SOW, Exhibit A</td>
<td>111</td>
<td>8880</td>
</tr>
<tr>
<td>4</td>
<td>10,000</td>
<td>POUND</td>
<td>Aluminum, Non-CRV at the Escondido Maintenance Station per SOW, Exhibit A</td>
<td>0.65</td>
<td>6500</td>
</tr>
<tr>
<td>5</td>
<td>80</td>
<td>TON</td>
<td>Miscellaneous Scrap Metals at the Kearny Mesa Maintenance Station per SOW, Exhibit A</td>
<td>111</td>
<td>8880</td>
</tr>
<tr>
<td>6</td>
<td>10,000</td>
<td>POUND</td>
<td>Aluminum, Non-CRV at the Kearny Mesa Maintenance Station per SOW, Exhibit A</td>
<td>0.65</td>
<td>6500</td>
</tr>
<tr>
<td>7</td>
<td>80</td>
<td>TON</td>
<td>Miscellaneous Scrap Metals at the Chula Vista Maintenance Station per SOW, Exhibit A</td>
<td>111</td>
<td>8880</td>
</tr>
<tr>
<td>8</td>
<td>10,000</td>
<td>POUND</td>
<td>Aluminum, Non-CRV at the Chula Vista Maintenance Station per SOW, Exhibit A</td>
<td>0.65</td>
<td>6500</td>
</tr>
<tr>
<td>9</td>
<td>80</td>
<td>TON</td>
<td>Miscellaneous Scrap Metals at the Santee Maintenance Station per SOW, Exhibit A</td>
<td>111</td>
<td>8880</td>
</tr>
<tr>
<td>10</td>
<td>10,000</td>
<td>POUND</td>
<td>Aluminum, Non-CRV at the Santee Maintenance Station per SOW, Exhibit A</td>
<td>0.65</td>
<td>6500</td>
</tr>
</tbody>
</table>

1) The above quantities are estimates only and are given as a basis for comparison of bids. No guarantee is made or implied as to the exact quantity that will be needed.

2) In case of discrepancy between the unit price and the total set forth for a unit basis item, the unit price shall prevail.

3) All items shall be bid on. Any items not bid on shall be deemed non-responsive.

4) Any bid amounts that are altered or erased shall be disqualified and deemed non-responsive.

Total this proposal: $76,900
**BID/BIDDER CERTIFICATION SHEET**

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

A. Our all-inclusive bid is submitted in a sealed envelope marked "Bid Submittal - Do Not Open".
B. All required attachments are included with this certification sheet.
C. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
D. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
E. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

**An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection**

<table>
<thead>
<tr>
<th>1. Company Name</th>
<th>2. Telephone Number</th>
<th>2a. Fax Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ekco Metals</td>
<td>(323) 264-1615</td>
<td>(323) 264-6910</td>
</tr>
</tbody>
</table>

2b. Email Address: herb@ekcometals.com

<table>
<thead>
<tr>
<th>3. Address</th>
<th>4. Indicate your organization type:</th>
<th>5. Indicate the applicable employee and/or corporation number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2777 E. Washington Blvd. Los Angeles, CA 90023</td>
<td>□ Sole Proprietorship</td>
<td>95-2787158</td>
</tr>
<tr>
<td>2846 Commercial St., San Diego, CA 92113</td>
<td>□ Partnership</td>
<td></td>
</tr>
</tbody>
</table>

8. California Corporation No.: 0663557

Indicate applicable license and/or certification information:
9. Contractor’s State Licensing Board Number
10. PUC License Number CAL-T
11. Required

12. Bidder’s Name (Print): Herb Gelman
13. Title: Director of Purchasing

14. Signature: [Signature]
15. Date: 03-05-15

16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:
   a. Small Business Enterprise: Yes □ No ☑
   b. Disabled Veteran Business Enterprise: Yes □ No ☑

If yes, enter certification number:
If you are a Small Business Enterprise, enter your SBD number:
If you are a Disabled Veteran Business Enterprise, enter your DVC number:

**NOTE:** A copy of your Certification is required to be included if either of the above items is checked “Yes”.

Date application was submitted to OSDS, if an application is pending:

17. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation?

Yes □ No ☑

If Yes, complete and return the Bidder Declaration form, GSPD-05-105 with your bid.
BIDDER DECLARATION

1. Prime bidder information (Review attached Bidder Declaration Instructions prior to completion of this form):
   a. Identify current California certification(s) (MB, SB, SB/NSVA, DVBE): ___ or None ___ (if "None" go to Item #2)
   b. Will subcontractors be used for this contract? Yes ___ No ___ (If yes, indicate the distinct element of work your firm will perform in this contract e.g., list the proposed products produced by your firm, state if your firm owns the transportation vehicles that will deliver the products to the State, identify which solicited services your firm will perform, etc.). Use additional sheets, as necessary.
   c. If you are a California certified DVBE:  
      (1) Are you a broker or agent? Yes ___ No ___ 
      (2) If the contract includes equipment rental, does your company own at least 51% of the equipment provided in this contract (quantity and value)? Yes ___ No ___ N/A ___

2. If no subcontractors will be used, skip to certification below. Otherwise, list all subcontractors for this contract. (Attach additional pages if necessary):

<table>
<thead>
<tr>
<th>Subcontractor Name, Contact Person, Phone Number &amp; Fax Number</th>
<th>Subcontractor Address &amp; Email Address</th>
<th>CA Certification (MB, SB, DVBE or None)</th>
<th>Work performed or goods provided for this contract</th>
<th>Corresponding % of bid price</th>
<th>Good Standing?</th>
<th>51% Rental?</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEVERAGE</td>
<td>PO Box 3658, Auburn, CA 95604, <a href="mailto:katie.fuller@yahoo.com">katie.fuller@yahoo.com</a></td>
<td>MB, DVBE</td>
<td>Bid Document Preparation, Staffing, Supply Administrative Duties, Project Management, invoicing and bill of lading preparation</td>
<td>3%</td>
<td>yes</td>
<td>n/a</td>
</tr>
</tbody>
</table>

CERTIFICATION: By signing the bid response, I certify under penalty of perjury that the information provided is true and correct.
 JOB ESTIMATE

TO: Herb Gelman
    Ekco Metals

310-927-5040

LEVERAGE
Katie Fuller
PO Box 3058
Auburn, CA 95604
(530) 701-6421

<table>
<thead>
<tr>
<th>JOB DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply Materials, bookkeeping, project management, administrative duties</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ITEMIZED ESTIMATE: TIME AND MATERIALS</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated Hours</td>
<td>$2,325.00</td>
</tr>
</tbody>
</table>

Tax

TOTAL ESTIMATED JOB COST $2,325.00

This is an estimate only, not a contract. This estimate is for completing the job described above, based on our evaluation. It does not include unforeseen price increases or additional labor and materials which may be required should problems arise.

Katie Fuller 3/5/2015
PREPARED BY DATE
STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES PROCUREMENT DIVISION
DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS
STD. 843 (Rev. 5/20/06)

Instructions: The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment (Military and Veterans Code Section 999.2). Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of perjury.

SECTION 1

Name of certified DVBE: LEVERAGE / Katie Fuller

DVBE Ref. Number: 1302160


Solicitation/Contract Number: 11A2266

SCPRS Ref. Number: (FOR STATE USE ONLY)

SECTION 2

APPLIES TO ALL DVBEs. Check only one box in Section 2 and provide original signatures.

☐ I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code Section 999.2 (b), of materials, supplies, services or equipment listed above. Also, complete Section 3 below if renting equipment.

☐ Pursuant to Military and Veterans Code Section 999.2 (f), I (we) declare that the DVBE is a broker or agent for the principal(s) listed below or on an attached sheet(s). (Pursuant to Military and Veterans Code Section 999.2 (e), State funds expended for equipment rented from equipment brokers pursuant to contracts awarded under this section shall not be credited toward the 3-percent DVBE participation goal.)

All DV owners and managers of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

Katie Fuller

(Printed Name of DV Owner/Manager) 3/5/2015 (Signature of DV Owner/Manager)

(Date Signed)

(Please add分裂至多 harming, list on extra sheets.)

Firm/Principal Tel/Principal Phone: Address:

Firm/Principal for whom the DVBE is acting as a broker or agent:

(Print or Type Name)

(Printed Name of DV Owner/Manager) (Signature of DV Owner/Manager) (Date Signed)

SECTION 3

APPLIES TO ALL DVBEs THAT RENT EQUIPMENT AND DECLARE THE DVBE IS NOT A BROKER.

☐ Pursuant to Military and Veterans Code Section 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or a DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with Military and Veterans Code Section 999 et seq.

☐ The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented for use in the contract identified above. I (we), the DV owners of the equipment, have submitted to the administering agency my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in Military and Veterans Code 999.2, subsections (c) and (g). Failure by the disabled veteran equipment owner(s) to submit their personal federal tax return(s) to the administering agency as defined in Military and Veterans Code 999.2, subsections (c) and (g), will result in the DVBE being deemed an equipment broker.

Disabled Veteran Owner(s) of the DVBE (attach additional pages with signature blocks for each person to sign):

(Printed Name) (Signature) (Date Signed)

(Address of Owner) (Telephone) (Tax Identification Number of Owner)

Disabled Veteran Manager(s) of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

(Printed Name of DV Manager) (Signature of DV Manager) (Date Signed)

Page 1 of 1