

CITY COUNCIL

The City of Orange Township, New Jersey

DATE April 16, 2024

NUMBER 232-2024

TITLE: A RESOLUTION AUTHORIZING A CONTRACT TO PURCHASE UNIFORMS WITH GALLS UNIFORMS, 1015 BROAD STREET, NEWARK, NEW JERSEY, 07102 UNDER STATE CONTRACT # 19-FOOD-00801 UNTIL DECEMBER 31, 2024, IN AN AMOUNT NOT TO EXCEED \$30,000.00

WHEREAS, the contract with Galls Uniform to provide uniforms for the Orange Police Department personnel expired on December 31, 2020; and

WHEREAS, Galls Uniform is a state contract vendor under State Contract 19-FOOD-00801 for Uniforms Class "A", "B", and security officer and shoes Class "A"; and

WHEREAS; Galls Uniform has performed in an effective and efficient manner; and

WHEREAS; there are police officers who must be issued uniforms as part of their contract with the City of Orange Township; and

WHEREAS, the Chief Financial Officer of the City of Orange Township has prepared the necessary Certificate of Availability of Funds, a copy of which is attached hereto certifying that funds will be available for this purpose in Account No. 4-01-25-240-000-302, contingent upon Council approval and inclusion of said item in the Temporary Budget and adopted 2024 Budget, there will be sufficient funds to contract Galls LLC.

NOW, THEREFORE, BE IT RESOLVED THAT THE MUNICIPAL COUNCIL OF THE CITY OF ORANGE TOWNSHIP hereby endorses and authorizes the purchase of uniforms from Galls Uniforms at the total cost not to exceed \$30,000.00

Adopted: April 16, 2024

Joyce Lanier
Municipal Clerk

Honorable Tency A. Eason
Council President

CITY OF ORANGE TOWNSHIP
FINANCE DEPARTMENT

CERTIFICATION OF FUNDS
NEXT BUDGET

I, Nile Clements, Chief Financial Officer for the City of Orange Township, do hereby confirm that based on the Quote or RFP, RFQ, bid results or "extraordinary unspecifiable services" without competitive bids for 2024 service contract, and the resolution to be presented to the Council for approval, and contingent upon Council approval and inclusion of said item in the Temporary Budget and adopted 2024 Budget, there will be sufficient funds to contract with:

Vendor Name: Galls Parent Holdings LLC.
Galls, LLC

Address: P.O. Box 505614

City: St. Louis
State: Missouri
Zip Code: 63150-5614

Purpose: Purchase Uniforms
Vendor ID: GALLS015

Temporary Budget: \$ 7,500.00
Fund: Current Fund
Line Description OPD - Police O&E - Uniforms, Clothing, Etc.
Account Numbers(s): CY'24 4-01-25-240-000-302

The remainder of: \$ 22,500.00
will be provided in
Fund: Current Fund
Line Description OPD - Police O&E - Uniforms, Clothing, Etc.
Account Numbers(s): CY'24 4-01-25-240-000-302

Purchase Order # : 24-00865

Amount not to exceed: \$ 30,000.00

Division Head

Date

Nile Clements

3/22/2024

Chief Financial Officer

Date



Master Blanket Purchase Order 19-FOOD-00801

Header Information

Purchase Order Number:	19-FOOD-00801	Release Number:	0	Short Description:	T0448 - UNIFORMS - CLASS "A", "B" AND SECURITY OFFICER, AND SHOES CLASS "A" - NJSP
Status:	3PS - Sent	Purchaser:	Erin Flynn	Receipt Method:	Quantity
Fiscal Year:	2019	PO Type:	Blanket	Minor Status:	
Organization:	Division of Purchase and Property				
Department:	DPP - Division of Purchase and Property	Location:	FOOD - Commodities/Food & Clothing	Type Code:	RFP/SBE
Alternate ID:		Entered Date:	04/18/2019 10:40:11 AM		
Days ARO:	120	Retainage %:	0.00%	Discount %:	0.00%
Release Type:	Direct Release				
Contact Instructions:		Tax Rate:		Actual Cost:	\$904.45
Print Format:	PO Print				
T Number:	T0448				
NJ Cooperative Purchasing:	No				
Green Blanket PO:	No				
Emergency Blanket PO:	No				
Set Aside Category:	Small Business Set Aside - Categories 1, 2 and 3				
NJ Vendor Certification Category:					

**Performance Bond
Required:** No

PO_Contact_Email:

Agency Attachments: T0448 Amendment 13 Extension 10 1.25.2024~1.doc
BiddersDataPacketV3
NJStandardTermsandConditionsV3
StandardDocumentsV28
14-X-23208SignatoryPage
14-X-23208Pricesheet
14-x-23208RFP
14-x-23208Attachment-1
14-x-23208ResponsestoElectronicQuestions-1
T0448AwardSummary
T0448ContractExtension1
T0448ContractExtension2.pdf
T0448ContractExtension3.pdf
Amendment #4 - Galls Contract Assignment
T0448 5.3 Extension Amendment~6.docx
Extension - Amendment 5
Amendment 6 T0448~4.docx
Amendment 7 T0448~2.docx
T0448 Amendment 9 Extension 8~5.doc
T0448 Amendment 10 Extension B and Price Adjustment.doc
T0448 Amendment 12 Extension 9~4.doc

Vendor Attachments:

Primary Vendor Information & PO Terms

Vendor:	V00002688 - Galls LLC Robbie Smith 1340 Russell Cave Rd Lexington, KY 40505 US Email: goodwin- amanda@galls.com Phone: (800)876-4242 FAX: (877)914-2557	Payment Terms:	Shipping Method:
		Shipping Terms:	Freight Terms:

PO

Acknowledgements:	Document	Notifications	Acknowledged Date/Time
	Purchase Order	Emailed to knox-brittany@galls.com at 04/30/2019 02:16:36 PM	
	Change Order 1	Emailed to knox-brittany@galls.com at 04/30/2019 03:53:17 PM	
	Change Order 2	Emailed to knox-brittany@galls.com at 05/06/2019 09:43:37 AM	08/21/2019 02:53:01 PM
	Change Order 3	Emailed to knox-brittany@galls.com at 03/18/2020 12:12:23 PM	
	Change Order 4	Emailed to knox-brittany@galls.com at 01/27/2021 10:52:17 AM	
	Change Order 5	Emailed to knox-brittany@galls.com at 04/15/2021 11:05:38 AM	
	Change Order 6	Emailed to knox-brittany@galls.com at 10/29/2021 03:36:54 PM	
	Change Order 7	Emailed to knox-brittany@galls.com at 02/11/2022 01:54:45 PM	
	Change Order 8	Emailed to knox-brittany@galls.com at 08/03/2022 10:34:53 AM	08/27/2022 11:15:33 AM
	Change Order 9	Emailed to knox-brittany@galls.com at 09/27/2022 10:26:51 AM	
	Change Order 12	Emailed to goodwin-amanda@galls.com at 10/24/2023 11:28:04 AM	
	Change Order 13	Emailed to goodwin-amanda@galls.com at 01/25/2024 04:07:58 PM	

Master Blanket/Contract Vendor Distributor List

Vendor ID	Vendor Name	Preferred Delivery Method	Vendor Distributor Status
V00002688	Galls LLC	Email	Active

Master Blanket/Contract Controls

Master Blanket/Contract Begin Date: 05/01/2014 **Master Blanket/Contract End Date:** 01/30/2025
Cooperative Purchasing Allowed: Yes

Organization	Department	Dollar Limit	Dollars Spent to Date	Minimum Order Amount
AGENCY - Division of Purchase and Property	DPP - Division of Purchase and Property	\$0.00	\$0.00	\$0.00

Organization	Department	Dollar Limit	Dollars Spent to Date	Minimum Order Amount
DIVSTPOL - Division of State Police	DSPCPROC - Central Purchasing	\$0.00	\$741,380.00	\$0.00

Item Information

Print Sequence # 48.0, Item # 1: RAINCOAT- FEATHERWEIGHT, REVERSIBLE CLASS "A" STYLE #9690-2A WITH GOR-TEX FABRIC COLOR FRENCH BLUE REVERSING TO FLUORESCENT INTERNATIONAL YELLOW BLAUER OR APPROVED EQUAL MADE OUTSIDE USA BRAND NAME: BLAUER MODEL: STYLE #: 9690-2 **MADE OUTSIDE USA** 3PS - Sent

NIGP Code: 200-85
Uniforms, Blended Fabric

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$290.95	EA - Each	0.00	\$0.00		\$0.00	\$290.95
Manufacturer:			Brand:			Model:		
Make:			Packaging:					

Print Sequence # 49.0, Item # 2: RAINCAP - FRENCH BLUE/FLUORESCENT INTERNATIONAL YELLOW WITH GOR-TEX FABRIC BLAUER STYLE #9101-2 OR APPROVED EQUAL MADE OUTSIDE USA BRAND NAME: BLAUER MODEL: STYLE #:9101-2 **MADE OUTSIDE USA** 3PS - Sent

NIGP Code: 201-65
Rainwear: Raincoats, Hats, Slicker Suits, Storm Suits, Umbrellas, etc.

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$13.10	EA - Each	0.00	\$0.00		\$0.00	\$13.10
Manufacturer:			Brand:			Model:		
Make:			Packaging:					

Print Sequence # 50.0, Item # 3: STORAGE RAINCOAT BAG - BLACK (NJSP) BLAUER STYLE #ZB1814 OR 3PS -
 APPROVED EQUAL MADE OUTSIDE USA BRAND NAME: BLAUER MODEL: STYLE Sent
 #: ZB1814 **MADE OUTSIDE USA**

NIGP Code: 200-85
 Uniforms, Blended Fabric

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$11.25	EA - Each	0.00	\$0.00		\$0.00	\$11.25
Manufacturer:			Brand:			Model:		
Make:			Packaging:					

Print Sequence # 60.0, Item # 4: JACKET, BOMBER - ALL WEATHER REVERSIBLE (NJSP) CLASS "B" COLOR: 3PS -
 FRENCH BLUE REVERSING TO FLOURSCENT INTERNATIONAL YELLOW MADE Sent
 OUTSIDE USA BRAND NAME: BLAUER MODEL: STYLE #: NJSPB2013 **MADE
 OUTSIDE USA**

NIGP Code: 200-85
 Uniforms, Blended Fabric

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$289.63	EA - Each	0.00	\$0.00		\$0.00	\$289.63
Manufacturer:			Brand:			Model:		
Make:			Packaging:					

Print Sequence # 61.0, Item # 5: RAIN PANTS, GOR-TEX, FRENCH BLUE BLAUER, STYLE #9972 OR APPROVED 3PS -
 EQUAL MADE OUTSIDE USA BRAND NAME: BLAUER MODEL: STYLE #: 9972 Sent
 MADE OUTSIDE USA

NIGP Code: 201-65
 Rainwear: Raincoats, Hats, Slicker Suits, Storm Suits, Umbrellas, etc.

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$99.52	EA - Each	0.00	\$0.00		\$0.00	\$99.52
Manufacturer:			Brand:			Model:		
Make:			Packaging:					

Print Sequence # 71.0, Item # 6: COST FOR BIDDER TO MEASURE RECRUIT. IF CONTRACTOR IS REQUIRED TO MEASURE MORE THAN ONE ITEM ON EACH RECRUIT, ONLY A SINGLE CHARGE WILL BE ALLOWED. 3PS - Sent

NIGP Code: 201-65

Rainwear: Raincoats, Hats, Slicker Suits, Storm Suits, Umbrellas, etc.

Receipt Method	Qty	Unit Cost	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Total Cost
Quantity	1.0	\$200.00	EA - Each	0.00	\$0.00		\$0.00	\$200.00

Manufacturer:

Brand:

Model:

Make:

Packaging:

Exit

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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. Galls Parent Holdings, LLC	
2 Business name/disregarded entity name, if different from above Galls, LLC (FEIN #20-3545989)	
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"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <u>P</u> <small>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.</small> <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. P. O. Box 505614	Requester's name and address (optional)
6 City, state, and ZIP code St. Louis, MO 63150-5614	
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.

Social security number								

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.

or

Employer identification number									
8	2	-	4	0	9	9	4	6	9

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 ▶ <u>9/20/2022</u>
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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-DIV (dividends or capital gains distributions)
- 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.



**STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE**

Taxpayer Name: GALLS PARENT HOLDINGS LLC

Trade Name:

Address: 1340 RUSSELL CAVE RD
LEXINGTON, KY 40505

Certificate Number:

Effective Date: May 08, 2019

Date of Issuance: May 08, 2019

For Office Use Only:

20190508081520868

BUSINESS ENTITY DISCLOSURE CERTIFICATION
FOR NON-FAIR AND OPEN CONTRACTS
Required Pursuant To N.J.S.A. 19:44A-20.8
CITY OF ORANGE TOWNSHIP, NEW JERSEY

The following is statutory text related to the terms and citations used in the Business Entity Disclosure Certification form.

“Local Unit Pay-To-Play Law” (P.L. 2004, c.19, as amended by P.L. 2005, c.51)

19:44A-20.6 Certain contributions deemed as contributions by business entity.

5. When a business entity is a natural person, a contribution by that person's spouse or child, residing therewith, shall be deemed to be a contribution by the business entity. When a business entity is other than a natural person, a contribution by any person or other business entity having an interest therein shall be deemed to be a contribution by the business entity.

19:44A-20.7 Definitions relative to certain campaign contributions.

6. As used in sections 2 through 12 of this act:

“business entity” means any natural or legal person, business corporation, professional services corporation, limited liability company, partnership, limited partnership, business trust, association or any other legal commercial entity organized under the laws of this State or of any other state or foreign jurisdiction;

“interest” means the ownership or control of more than 10% of the profits or assets of a business entity or 10% of the stock in the case of a business entity that is a corporation for profit, as appropriate;

Temporary and Executing

12. Nothing contained in this act shall be construed as affecting the eligibility of any business entity to perform a public contract because that entity made a contribution to any committee during the one-year period immediately preceding the effective date of this act.

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**The New Jersey Campaign Contributions and Expenditures Reporting Act (N.J.S.A. 19:44A-1 et seq.)**

**19:44A-3 Definitions.** In pertinent part...

p. The term "political party committee" means the State committee of a political party, as organized pursuant to R.S.19:5-4, any county committee of a political party, as organized pursuant to R.S.19:5-3, or any municipal committee of a political party, as organized pursuant to R.S.19:5-2.

q. The term "candidate committee" means a committee established pursuant to subsection a. of section 9 of P.L.1973, c.83 (C.19:44A-9) for the purpose of receiving contributions and making expenditures.

r. the term "joint candidates committee" means a committee established pursuant to subsection a. of section 9 of P.L.1973, c.83 (C.19:44A-9) by at least two candidates for the same elective public offices in the same election in a legislative district, county, municipality or school district, but not more candidates than the total number of the same elective public offices to be filled in that election, for the purpose of receiving contributions and making expenditures. For the purpose of this subsection: ...; the offices of member of the board of chosen freeholders and county executive shall be deemed to be the same elective public offices in a county; and the offices of mayor and member of the municipal governing body shall be deemed to be the same elective public offices in a municipality.

**19:44A-8 and 16 Contributions, expenditures, reports, requirements.**

*While the provisions of this section are too extensive to reprint here, the following is deemed to be the pertinent part affecting amounts of contributions:*

“The \$300 limit established in this subsection shall remain as stated in this subsection without further adjustment by the commission in the manner prescribed by section 22 of P.L.1993, c.65 (C.19:44A-7.2)

**BUSINESS ENTITY DISCLOSURE CERTIFICATION**  
**FOR NON-FAIR AND OPEN CONTRACTS**  
 Required Pursuant To Ordinance §4-70, et seq.  
**CITY OF ORANGE TOWNSHIP, NEW JERSEY**

**Part I – Vendor Affirmation**

The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that

Galls, LLC (Contractor)

has not made and will not make any reportable contributions pursuant to Ordinance 4-70 et seq. that would bar the award of this contract in the one year period preceding the date of reorganization to any of the following named candidate committee, joint candidates committee; or political party committee representing the elected officials of the **CITY OF ORANGE TOWNSHIP** as defined pursuant to N.J.S.A. 19:44A-3(p), (q) and (r).

|                                      |  |
|--------------------------------------|--|
| <u>Dwayne D. Warren, Esq., Mayor</u> |  |
| <u>Hon. Kerry J. Coley</u>           |  |
| <u>Hon. Adrienne K. Wooten</u>       |  |
| <u>Hon. Tency A. Eason</u>           |  |
| <u>Hon. Clifford R. Ross</u>         |  |
| <u>Hon. Quantavia L. Hilbert</u>     |  |
| <u>Hon. Jamie Summers-Johnson</u>    |  |
| <u>Hon. Weldon M. Montague</u>       |  |
|                                      |  |

**Part II – Ownership Disclosure Certification**

I certify that the list below contains the names and home addresses of all owners holding 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business entity:

- Partnership                       Corporation                       Sole Proprietorship                       Subchapter S Corporation  
 Limited Partnership                       Limited Liability Corporation                       Limited Liability Partnership

| Name of Stock or Shareholder          | Home Address                                |
|---------------------------------------|---------------------------------------------|
| Galls Intermediate Holdings, LLC 100% | 1340 Russell Cave Road, Lexington, KY 40505 |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |
|                                       |                                             |

**Part 3 – Signature and Attestation:**

The undersigned is fully aware that if I have misrepresented in whole or part this affirmation and certification, I and/or the business entity, will be liable for any penalty permitted under law.

Name of Business Entity: Galls, LLC

Signed: *Mike Fadden* Title: CEO

Print Name: Mike Fadden Date: 3/1/2024

|                                                                                     |                                                                                          |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Subscribed and sworn before me the <u>1st</u> day of <u>February</u> , 20 <u>24</u> | <u><i>Tiffany Brewer</i></u><br>(Affiant)                                                |
| My Commission expires: <u>2/12/2027</u>                                             | <u>Tiffany Brewer, Notary Public</u><br>(Print name & title of affiant) (Corporate Seal) |

