Docusign Envelope ID: 32AF09F7-B03D-4E62-A066-75222E6A3419 **NUMBER OF INVITATIONS ISSUED:** 2 **NUMBER OF BIDS RECEIVED: DESCRIPTION OF SUPPLIES OR SERVICES:** Pole, Concrete, 35FT and 55FT, Clare B

ROWER AUTHO	PROCUREMENT DIVISION
G##1	GUAM POWER AUTHORITY
OFR TO SU	ABSTRACT OF BIDS

INVITATION NUMBER:

	CI	PA-	039	-24	
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OPENING DATE:

OPENING TIME:

06/04/2024

11:00 A.M.

	_					
		LINE TEM C	LINETTEM 2	LINETTEMB	LINETTEM 4	LINETTEM'S
	DESCRIPTION					
	QTY.	20	15	200		
	UNIT	Each	EACH	1.00		
	DELIVERY	After Acceptance - House	8 WEEKS FOR I WOULDON	corder		
BIDDER		TEMPS		39		
No.: [] Vendor Name: benson Guain Enterprises Inc.	BASIC			24 SI	3.05083965	1 27.76
Bound Paper Original Qty. Bound Paper Copies Qty.	UNIT COST	4,250.00	17,200.00			
CHANGE CHANALTER	PART NUMBER				200	
Weid Bond #: 200400000015P6A-9011 15%	CATALOG NUMBER		35091128			
	MANUFACTURER	samsung Industeur	Samsung Industr	iy .	2.300	300
Certificate of Authority Power of Attorney [] Standby Letter of Credit # Amount \$	DELIVERY	as speaked	as specified		390	* 3 8%
	TOTAL LUMP SUM	1 0	1		1	
[] Letter of Credit # Amount \$					No. 1-1-1-1	
[] Cashier's or Certified Check # Amount \$			According to the second se			
[] Wire Transfer	ALTERNATE			- E24		
Affidavits (Original Form)	UNIT COST					20
[] Affidavits (Copy Form): Originals submitted with	PART NUMBER					21 2
The distance of Michigans	CATALOG NUMBER					
Hethical Standards Wage Determination Restriction Against Sex Offendors	MANUFACTURER				2.28	
[] Business License [] Contractors License	DELIVERY		* ×			
Leccal Procurement Signed and Submitted	TOTAL LUMP SUM			5		
Contingent Fees						

TABULATED BY:	ATTILL	NIMS
TABULATED BY:	Comme	MUL

I hereby certify that all bids received in response to this invitation were opened under my

personal supervision, and that the names of all bidders have been entered herein.

_	DATE:	6	4	OY
		-		377

]	Lowest Responsive Bidde
1	Tie Rid

Only Bid

Other Than Lowest Responsive Bidder

Butto For Avenue

NAMES OF PERSONS PRESENT AT THE BID OPENING AND WHOM THEY REPRESENT				
PRINT NAME:	COMPANY NAME:	SIGNATURE:	DATE:	
			A. 49	
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