

Suppliers/Contractor's List

We, the members of the _____
(Organization/Company)

hereby submit the following information:

___ Apparatus Loan The names of organizations, retailers, and wholesalers that will be involved in the purchase or rehabilitation of your apparatus.

___ Facilities Loan The names of organizations, retailers, and wholesalers that will supply materials necessary in the renovation or construction of your facility.

___ Equipment Loan The names or organizations, retailers, and wholesalers that will supply your accessory, communications, or protective equipment.

Supplier/Contractor	Type of Purchase or Material	Cost

Organization/Company Representative Name

Title

Organization/Company Representative Signature

Date