

Attachment A

COMPANY PROFILE FORM

COMPANY NAME: _____

ADDRESS OF COMPANY: _____

DATE OF INCORPORATION: _____ STATE OF INCORPORATION: _____

PHONE NUMBER: _____ TOLL FREE PHONE NUMBER: _____

FAX NUMBER: _____ EMAIL ADDRESS: _____

FEIN NUMBER: _____

NUMBER OF GEOGRAPHIC LOCATIONS: _____

- # OF YEARS IN BUSINESS PROVIDING: management and operation of an academic bookstore, including textbooks, printed and digital reference books, used textbooks, and software.

of years: _____

Client/s and Location/s and Start and End date of Services: _____

TYPE AND SIZE OF CUSTOMERS/BOOKSTORES :

- # OF YEARS IN BUSINESS PROVIDING: selling college or university branded, premium quality merchandise, to include at a minimum apparel, student school supplies, and novelties.

of years: _____

Client/s and Location/s and Start and End date of Services: _____

- # OF YEARS IN BUSINESS PROVIDING: management and operation of campus convenience stores, selling items such as snacks, beverages, school supplies and miscellaneous retail.

of years: _____

Client/s and Location/s and Start and End date of Services: _____

Note: Clients named/provided in this form may be contacted for a reference.

OF YEARS IN BUSINESS UNDER PRESENT NAME: _____

OTHER OR FORMER NAMES UNDER WHICH YOUR ORGANIZATION HAS OPERATED: _____

TYPE OF ORGANIZATION (I.E., CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE):

NAME OF PRINCIPAL(S) AND TITLE(S):

BRIEF HISTORY OF COMPANY: _____

BRANCH OFFICE

TOTAL COMPANY

WHICH WILL
SERVICE UB:

Total Number of employees (Locally):

Total Number of employees
(Nationally)

TOTAL COMPANY ANNUAL SALES VOLUME FOR ALL SERVICES:

2021 _____

2022 _____

2023 _____