#### AUTHORIZED REPRESENTATIVES

Name of Organization 2930 Wetmore Av	ve Suite 9E		,	
Mailing Address		/erett	WA	98201
Street Address/Location	(If different from mailing address)	City	State	Zip
Snohomish	425-257-8840		425-257	-8864
County	Telephone Number		Fax Number	
Federal Tax ID Number	(TIN) 91-6001248	Ema	il Address bids	@everettwa.gov
THE FOLLOWING REF	RESENTATIVES ARE DESIG	NATED TO	<b>:</b>	
[ ] Acquire State Pr	ary funds for this purpose;		anditions ussum	rations, and vacturations attack
[x] Verify by their s	signature they have read and agreation Documents agreeing to term the agency.			
[X] Verify by their s [X] Execute Distribution	ution Documents agreeing to term in the agency. GNATIONS	ms, condition	ns, reservations, a	and restrictions applying to p
X  Verify by their s  X  Execute Distribution obtained through   III. NEW DESIGN (Delete all previous and REPRESENTATIVES:	ution Documents agreeing to term the agency. GNATIONS authorizations)	ms, condition	ns, reservations, a	and restrictions applying to p NAL DESIGNATIONS ONI uthorization)
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X  Verify by their s  X  Execute Distribution obtained through   III. NEW DESIGN (Delete all previous and pr	ation Documents agreeing to term the agency.  GNATIONS authorizations)  Email Ad  hbrillantes@everettwa.gov  ddmarco@everettwa.gov	ms, condition	X ADDITIO	and restrictions applying to p  NAL DESIGNATIONS ON athorization)  Signature  Bullants
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### Authorized Purchasers\_WA State Surplus

Final Audit Report 2025-03-03

Created: 2025-02-28

By: Bert Cueva (bcueva@everettwa.gov)

Status: Signed

Transaction ID: CBJCHBCAABAAs7J1cCoEQZ8mb5uGsImJerY9enye\_-ji

#### "Authorized Purchasers\_WA State Surplus" History

- Document created by Bert Cueva (bcueva@everettwa.gov) 2025-02-28 8:37:41 PM GMT
- Document emailed to Theresa Bauccio (TBauccio@everettwa.gov) for signature 2025-02-28 8:47:10 PM GMT
- Document emailed to Dave DeMarco (ddemarco@everettwa.gov) for signature 2025-02-28 8:47:10 PM GMT
- Document emailed to Heide Brillantes (HBrillantes@everettwa.gov) for signature 2025-02-28 8:47:10 PM GMT
- Document emailed to Jamielee Graves (jgraves@everettwa.gov) for signature 2025-02-28 8:47:10 PM GMT
- Document emailed to Bert Cueva (bcueva@everettwa.gov) for signature 2025-02-28 8:47:10 PM GMT
- Document e-signed by Bert Cueva (bcueva@everettwa.gov)
  Signature Date: 2025-02-28 8:47:32 PM GMT Time Source: server
- Email viewed by Heide Brillantes (HBrillantes@everettwa.gov) 2025-02-28 8:47:54 PM GMT
- Document e-signed by Heide Brillantes (HBrillantes@everettwa.gov)
  Signature Date: 2025-02-28 8:54:50 PM GMT Time Source: server
- Email viewed by Theresa Bauccio (TBauccio@everettwa.gov)
  2025-02-28 9:21:13 PM GMT
- Document e-signed by Theresa Bauccio (TBauccio@everettwa.gov)
  Signature Date: 2025-02-28 9:21:29 PM GMT Time Source: server



Email viewed by Dave DeMarco (ddemarco@everettwa.gov) 2025-03-03 - 2:40:04 PM GMT

Document e-signed by Dave DeMarco (ddemarco@everettwa.gov)
Signature Date: 2025-03-03 - 2:40:30 PM GMT - Time Source: server

Email viewed by Jamielee Graves (jgraves@everettwa.gov) 2025-03-03 - 5:57:43 PM GMT

Document e-signed by Jamielee Graves (jgraves@everettwa.gov)
Signature Date: 2025-03-03 - 5:57:58 PM GMT - Time Source: server

Agreement completed. 2025-03-03 - 5:57:58 PM GMT

# Authorized Purchasers\_WA State Surplus Program\_332025\_SD1

Final Audit Report 2025-03-07

Created: 2025-03-06

By: Ashleigh Scott (AScott@everettwa.gov)

Status: Signed

Transaction ID: CBJCHBCAABAAtg4UInIDy6Q\_t4n-D8JwBd8IUInEQA4\_

## "Authorized Purchasers\_WA State Surplus Program\_332025\_S D1" History

- Document created by Ashleigh Scott (AScott@everettwa.gov) 2025-03-06 7:50:02 PM GMT
- Document emailed to Bert Cueva (bcueva@everettwa.gov) for approval 2025-03-06 7:51:41 PM GMT
- Email viewed by Bert Cueva (bcueva@everettwa.gov) 2025-03-06 7:56:08 PM GMT
- Document approved by Bert Cueva (bcueva@everettwa.gov)

  Approval Date: 2025-03-06 7:56:28 PM GMT Time Source: server
- Document emailed to Tim Benedict (TBenedict@everettwa.gov) for approval 2025-03-06 7:56:29 PM GMT
- Email viewed by Tim Benedict (TBenedict@everettwa.gov) 2025-03-06 8:18:12 PM GMT
- Document approved by Tim Benedict (TBenedict@everettwa.gov)

  Approval Date: 2025-03-06 8:23:57 PM GMT Time Source: server
- Document emailed to Cassie Franklin (cfranklin@everettwa.gov) for signature 2025-03-06 8:24:00 PM GMT
- Email viewed by Cassie Franklin (cfranklin@everettwa.gov)
  2025-03-07 3:26:24 PM GMT
- Document e-signed by Cassie Franklin (cfranklin@everettwa.gov)
  Signature Date: 2025-03-07 3:26:37 PM GMT Time Source: server



- Document emailed to Ashleigh Scott (AScott@everettwa.gov) for approval 2025-03-07 3:26:42 PM GMT
- Document approved by Ashleigh Scott (AScott@everettwa.gov)

  Approval Date: 2025-03-07 5:39:37 PM GMT Time Source: server
- Agreement completed. 2025-03-07 - 5:39:37 PM GMT