



Flowers for Hanging Baskets								
31	Regetta Sky Blue Lobelia	Sky Blue		268			\$ 6.34	\$ 1,699.12
32	Regetta Blue Splash Lobelia	Mottled White and Blue		268			\$ 6.34	\$ 1,699.12
33	Magadi Basket Dark Blue Lobelia	Dark Blue		268			\$ 6.34	\$ 1,699.12
34	White Calibrocha	White		268			\$ 6.34	\$ 1,699.12
35	Crystal Clear White Alyssum	White		268			\$ 6.34	\$ 1,699.12
36	Wonderland White Alyssum	White		268			\$ 6.34	\$ 1,699.12
37	Labour			134			\$ 50.00	\$ 6,700.00
Other								
38	Soil	N/A		44			\$ 88.38	\$ 3,888.58
39	Delivery Charge	N/A		N/A	N/A	N/A	\$ 4,500.00	\$ 4,500.00
40	Discounts	N/A		N/A	N/A	N/A	\$ -	\$ -
Subtotal								\$ 30,263.52
HST								\$ 3,934.26
<b>TOTAL AMOUNT DUE</b>								<b>\$ 34,197.77</b>

**Award of Contract**

**Your quote** provided under cover of RFP- PARKS-11-24 for the supply and delivery of the above specified bedding flowers and hanging baskets **is accepted.**

1. The Contractor is required to sign this document & return one copy to [kkluke@city.elliottlake.on.ca](mailto:kkluke@city.elliottlake.on.ca) The Contractor agrees to furnish & deliver all items set forth or otherwise identified above subject to the terms & conditions specified herein.

**Comments or Special Instructions**

2. The Contractor is required to complete and sign the attached Authorization for Payment by Direct Deposit form and return the Authorization form and a void cheque to the City of Elliot Lake at [apelliottlake@city.elliottlake.on.ca](mailto:apelliottlake@city.elliottlake.on.ca)

3. The City representative will inspect all flowers and hanging basket upon arrival and indicate the number of **Damaged** items & the number of items **Accepted** in the columns titled: # Damaged & # Accepted. **Invoice amount shall be based on #Accepted.**

Date Signed	SIGNATURE OF CONTRACTOR	Date Signed	Signature of Mayor
2025-01-22	<i>Andrew Cordier</i>		
Name and Title of Contractor Signer (type or print)		Date Signed	Signature of City Clerk
Andrew Cordier			
		I have authority to bind the Corporation	

**RECEIPT, INSPECTION AND ACCEPTANCE**

All bedding flowers of Line Item #1 to # 20, #21, #22 to #30, #31 to #36, and #38 have been

<input type="checkbox"/> Received	<input type="checkbox"/> Inspected
<input type="checkbox"/> Accepted, and confirms to the Contract except as noted:	

Printed Name and Title of Authorized City Employee	Date	Signature of Authorized City Employee

**Inventory Management Record**

Line Item #1 to # 37 have been						
<input type="checkbox"/>	Brought on charge in the Inventory Management System					

Printed Name and Title of Authorized City Employee	Date	Signature of Authorized City Employee

**Payment**

I Certify that this account is correct and proper for payment

Printed Name and Title of Certifying Agent	Date	Signature of Certifying Agent