March 20, 2015

Addendum # 2
RFP# 12-22

The attached Memorandum regarding - RFP# 12-22 U.S. Communities Cleaning Supplies, Equipment and Custodial Related Products, Services and Solutions is being received as an Addendum # 2 relating to the name change formerly AmSan, CleanSource, and JanPak, to the new consolidated name SupplyWorks. The Addendum and Memorandum will be accepted into and as part of the contract as of March 20, 2015.

Paul Rosencrans
Executive Director of Purchasing
Fresno Unified
MEMORANDUM
RFP #12-22
Fresno Unified School District

U.S. Communities Cleaning Supplies, Equipment and Custodial Related Products, Services and Solutions

On March 16th, 2015 Interline Brands unified five brands – AmSan®, CleanSource®, JanPak®, Trayco® and Sexauer® with the launch of SupplyWorks™, a new brand focused on institutional and commercial customers that will continue to deliver a full spectrum of janitorial and cleaning supplies. The launch of SupplyWorks™ represents a smarter, simpler, and more national approach that enhances our ability to provide our expertise and smart solutions that advance the performance of our customers’ facilities.

While the SupplyWorks™ brand name is new, nothing from an operating or ownership standpoint has changed. All existing AmSan, CleanSource, and JanPak customers utilizing the U.S. Communities contract should expect:

- No change to the Terms and Conditions of U.S. Communities #12-22 Contract with Fresno Unified School District.
- Existing account numbers will remain the same.
- Utilize the same Federal Tax ID Number from Interline Brands dba SupplyWorks™ (Attached)
- Receiving the very same products that they already value.
- Working with the same dedicated team of sales professionals they know and trust.
- No change to the features of the websites, logins and passwords, favorite’s list and order history.

For further information or questions please contact your local SupplyWorks™ sales professional or:

Becky Newell  
Business Development Manager  
becky.newell@supplyworks.com  
856.439.1222 x123163

John Pettinelli  
Strategic Account Manager  
john.pettinelli@supplyworks.com  
609.820.8593
Form W-9

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

1. Name (as shown on your income tax return). Name is required on this line, do not leave this line blank.
   INTERLINE BRANDS, INC

2. Business name/dissolved entity name, if different from above
   SUPPLYWORKS

3. Check appropriate box for federal tax classification; check only one of the following seven boxes:
   □ Individual/sole proprietor or □ C Corporation □ S Corporation □ Partnership □ Trust/estate
   □ Single-member LLC
   □ Limited liability company. Enter the tax classification (C: C-corporation, S: S corporation, P: partnership) □
   Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the
tax classification of the single-member owner.
   □ Other (see instructions) □

4. Address (number, street, and apt. or suite no.)
   701 SAN MARCO BLVD

5. City, state, and ZIP code
   JACKSONVILLE, FL 32207

6. List account number(s) here (optional)

Part I

Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding.
For individuals, this is generally your social security number (SSN). However, for a
resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other
entities, it is your employer identification number (EIN). If you do not have a number, see how to get a
TIN on page 5.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for
guidelines on whose number to enter.

Social security number

Employer Identification number

Part II

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue
   Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage
   Interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and
   generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the
   instructions on page 3.

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding
because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage
Interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and
generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the
instructions on page 3.

Sign Here

Signature of U.S. person □

Date □

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/f9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

• Form 1099-INT (interest earned or paid)
• Form 1099-DIV (dividends, including those from stocks or mutual funds)
• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
• Form 1099-S (proceeds from real estate transactions)
• Form 1098 (mortgage interest)
• Form 1099-E (student loan interest)
• Form 1098-T (tuition)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-in form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).

2. Certify that you are not subject to backup withholding.

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that you are a U.S. person, you allocate share of any partnership income from a U.S. trade or business that is subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See What is FATCA reporting? on page 2 for further information.
December 2, 2014

Mr. Marvin Wenger  
Interline Brands dba AmSan dba CleanSource  
650 Brennan Street  
San Jose, CA 95131-1204

Reference: RFP# 12-22- Cleaning Supplies, Equipment and Custodial Related Products

Dear Mr. Wenger:

This letter is in reference to the Fresno Unified School District’s U.S. Communities RFP #12-22 for cleaning supplies, equipment and custodial related products, services and solutions. The initial period of the contract is from January 1, 2013, through December 31, 2015, with two (2), one (1) year renewal options. Based on the success of the contract thus far, and per the request of interested parties for a stable long-term “piggyback” contract, Fresno Unified is hereby exercising the first year renewal to extend the contract through December 31, 2016.

This document will be added to the contract award documents which may be viewed on the Fresno Unified School District website at www.fresnounified.org.

Sincerely,

[Signature]

Paul Rosencrans  
Executive Director of Purchasing  
Fresno Unified School District

[Signature]

Marvin Wenger  
President/COO  
CleanSource
January 29, 2014

The attached Amendment # 1 for RFP # 12-22 was accepted to the original contract documents as of January 29, 2014.

[Signature]

Marisa Thibodeaux
Buyer II
Fresno Unified School District
December 21, 2013  
Paul Rosencrans  
Director of Procurement  
Fresno Unified School District  
4498 N Brawley Ave  
Fresno, CA 93722

Amendment Request  
Contract #12-22  
Cleaning Supplies, Equipment, and Custodial Related Products  
and Service and Solutions

Dear Paul,

We have fielded several requests from U.S. Communities members to procure financing for equipment purchased on the AmSan-CleanSource Jan/San contract with Fresno Unified School District.

We propose adding an amendment to Contract #12-22 referenced above to incorporate the attached Municipal Master Lease Agreement which will allow a Participating Public Agency (PPA) to access financing for all equipment acquired through Contract #12-22 if the PPA so desires.

Fair Market Value or “FMV” is the value of each item acquired for use as configured, in place and installed. The Fair Market Value or “FMV shall be determined by the equipment price on Contract #12-22 referenced above.

In such instances where the PPA enters into an agreement to finance the equipment the lease agreement will be in accordance with and subject to the relevant state statutes, ordinances, rules and regulations that govern each PPA’s procurement practices. Such terms and conditions will be binding on the contractor and PPA issuing the order.

Each Municipal Master Lease Agreement will include a “Non-Appropriations” agreement which provides the terms and conditions that allow the municipal customer to terminate the lease and return the equipment without penalty if funds for the next fiscal year cannot be made available.

All other terms and conditions remain the same.

John Pettinelli  
Strategic Account Manager

INTERLINE
804 East Gate Drive, Suite 100  
Mount Laurel, NJ 08054  
www.amsan.com
MUNICIPAL LEASE CREDIT APPLICATION

Please fully complete the following information and fax to All-Lines Leasing at (800) 288-4959

Legal Name of Lessee: ________________________________
Address: __________________________________________
City: __________________ State: __________ Zip: ______
Contact Person: __________________ Title: __________
Phone: ____________________ Fax: ________________
Alternative Contact Person: __________________ Title: __________

Date municipal entity was established:

<table>
<thead>
<tr>
<th>Total cost of Equipment:</th>
<th>Term:(years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Down Payment:</td>
<td>Delivery date:</td>
</tr>
<tr>
<td>Trade-In:</td>
<td>Payment: $</td>
</tr>
<tr>
<td>Amount to Finance:</td>
<td>Payments: Monthly Annual Semi-Annual Quarterly</td>
</tr>
</tbody>
</table>

Is the Equipment Replacing existing "like" Equipment: Yes No
If yes, please state how long the municipality has used the current Equipment and the reason for purchasing the new Equipment: __________________________________________________________

Does Lessee currently owe or currently making lease payments on the existing Equipment being replaced? Yes No
If yes, please describe in detail what agreement (if any) you have worked out with the vendor concerning the existing Equipment that is being replaced ________________________________________________________________

Please describe the new Equipment & attach a vendor brochure (Include the Hardware/Software Breakdown if computers):
Please describe in detail why Lessee needs the Equipment and the essential use the it will provide: ____________________________________________________________

What fund will the rental payments be made from: General or Special (Please Specify) __________________________

Have you ever been in Default or Non-Appropriated on a Municipal Lease: Yes No

Please accurately fill out the requested Fund information for either the General Fund or the Special Fund from which the payments will be made. Alternatively, you may fax a copy of your balance sheet and income statement along with the signed Formal Proposal to All-Lines Leasing at (800) 288-4959.

<table>
<thead>
<tr>
<th>Current Year</th>
<th>Prior Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenues:</td>
<td>$__________</td>
</tr>
<tr>
<td>Total Expenditures:</td>
<td>$__________</td>
</tr>
<tr>
<td>Fund Balances:</td>
<td>$__________</td>
</tr>
</tbody>
</table>

Completed By: __________________________ Title: __________
Vendor Name: __________________________________ Contact: __________
Vendor Phone: __________________________ Equipment Description: __________

100 Prairie Center Drive, Eden Prairie, MN 55344
Phone: 800-477-5855/FAX: 800-288-4959

10/10