SIGNATURE PAGE

Company Name: **Paulus Sokolowski and Sartor, LLC**
(PRINT)

Preparer's Name: **Steve Maravelias, LSRP**
(PRINT)

Signature:  **7/13/26**
(DATE)

Address: **1450 Route 34**

Wall, NJ 07753

Telephone No.: **848-206-2628**

Fax No.: **732-356-3726**

E-Mail Address: **smaravelias@psands.com**

*****(This should be the email where Contracts would be sent)*****

Contact Person: **Steve Maravelias, LSRP**

FEIN: [redacted]
(Federal Employee ID)

BRC: [redacted]
(Business Registration Certificate)

*****PLEASE COMPLETE AND SUBMIT WITH YOUR RFPQ RESPONSE*****

(Revised 2/2017)