

**INDIANA ECONOMIC IMPACT - PROPOSALS AND CONTRACTS**

State Form 51778 (R4 / 1-06)  
 DEPARTMENT OF ADMINISTRATION  
 Approved by State Board of Accounts, 2006

This information is required by the Indiana Department of Administration for all contractors, vendors/suppliers to the State of Indiana (complete all 22 items).

1	Legal Name of firm:	Sirchie Acquisition Company ,LLC
2	Address/City/State/Zip Code:	100 Hunter Place Youngsville NC 27596
3	Telephone #/Fax #/Website:	800-356-7311/800-899-8181/www.sirchie.com
4	Federal Tax Identification Number:	26-1186682
5	State/Country of domicile/incorporation:	North Carolina/ USA/Delaware
6	Location of firm's headquarters or principal place of business:	100 Hunter Place Youngsville NC 27596
7	Name of parent company or holding company (if applicable):	Firefox Financial Holding, LLC
8	State/Country of domicile/incorporation of company listed in #7:	North Carolina/ USA/Delaware
9	Address of company listed in #7:	100 Hunter Place Youngsville NC 27596
10	IN Department of Workforce Development (DWD) account number:	3173 973 080 129
11	IN Department of Revenue (DOR) account number:	n/a
12	Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:	n/a
13	Total number of employees per most recently completed IRS Form W-2 distribution:	145 <span style="float: right;">145</span>
14	Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:	n/a
15	Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:	<del>1234</del>
16	Total amount of this proposal, bid, or current contract:	\$ 71621.00

**ACCOUNTING OF INDIANA RESIDENT EMPLOYEES**

17	Prime Contractor Company Name:	N/A
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18 **Number of Full Time Equivalent (FTE) employees** that are Indiana residents specifically for this proposal or contract: N/a

19	<b>Subcontractor Company Name:</b>	N/A			
20	Address/Contact Person/Telephone Number/Tax ID Number:	N/A			
21	<b>Number of Full Time Equivalent (FTE) employees</b> that are Indiana residents specifically for this proposal or contract:	N/A	0.00	0.00	0.00

22 **Affirmation by authorized official:** I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief:

Signature: *[Handwritten Signature]*

Name of auththorized official: Dan O'Neil

Title: Bid Specialist

Date: *11/11/22* 11/9/2022