



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:	Quench USA, Inc.
2	Address/City/State/Zip Code:	630 Allendale Rd. Ste 200, King of Prussia, PA 19406
3	Telephone #/Fax #/Website:	888-554-2782
4	Federal Tax Identification Number:	26-3264642
5	State/Country of domicile/incorporation:	Delaware, USA
6	Location of firm's headquarters or principal place of business:	630 Allendale Rd. Ste 200, King of Prussia, PA 19406
7	Name of parent company or holding company (if applicable):	Culligan
8	State/Country of domicile/incorporation of company listed in #7:	Illinois, USA
9	Address of company listed in #7:	9399 W Higgins Rd. #1100, Rosemont, IL 60018
10	IN Department of Workforce Development (DWD) account number:	587852
11	IN Department of Revenue (DOR) account number:	0134201493 001
12	Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:	10
13	Total number of employees per most recently completed IRS Form W-2 distribution:	10
14	Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:	391249.86
15	Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:	51,216,360.65
16	Total amount of this proposal, bid, or current contract:	\$ 399,805.08

ACCOUNTING OF INDIANA RESIDENT EMPLOYEES

17	Prime Contractor Company Name:	Quench USA, Inc.
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18	<u>Number of Full Time Equivalent (FTE) employees</u> that are Indiana residents specifically for this proposal or contract:	10.00
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19	<u>Subcontractor Company Name:</u>				
20	Address/Contact Person/Telephone Number/Tax ID Number:				
21	<u>Number of Full Time Equivalent (FTE) employees</u> that are Indiana residents specifically for this proposal or contract:	0.00	0.00	0.00	0.00

22	<u>Affirmation by authorized official:</u> I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief:				
	Signature:	<i>Cindy John</i>			
	Name of auththorized official:	Cindy John			
	Title:	Sales Operations Manager			
	Date:	03/15/2024			

FTE DETAILS
Job Titles and Contributing FTE

- **Populate the yellow-shaded cells; with all applicable job titles and the total FTE count.**
- **Respondents may insert additional rows to account for all job titles attributing to the total FTE count.**
Please keep in mind that the only FTE's that should be included in this count are Indiana employees working on this contract ONLY. If there are 10 employees working on this contract but they are splitting their time with numerous other contracts as well, then these employees cannot be counted as 1 FTE. Instead, these employees should be counted as a fraction of an FTE. For example: The project length of the contract is 24 months. There are 10 employees working on the contract over the 24 month contract period. 5 employees are working solely on the project for 24 months. 3 employees are working equal time on 2 projects for 24 months. 2 employees are working solely on the project for 6 months.
The FTEs would be calculated as follows:
5 employees x 24 months (24 months working solely on this project) x 1 (time spent solely on this project) = 120 months / 24 months (length of contract) = 5 FTEs
3 employees x 24 months x .5 (splitting time equally between 2 projects) = 36 months / 24 months = 1.5 FTEs
2 employees x 6 months (6 months dedicated solely to this project) x 1 (time spent solely on this project) = 12 months / 24 months = .5 FTEs

Column Title Definitions:
Number of Employees = Number of employees working on this State contract.
Duration (In Months) = Amount of time that the employee(s) will spend on the State contract.
Time Spent (Percentage) = Percentage of time the employee(s) will be working on the contract.

Duration of Initial Contract Term (In Months)	24	*Number based on initial contract term		
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PRIME CONTRACTOR COMPANY				
EMPLOYEE JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Example: Project Managers	5	24	100%	5.00
Example: Project Coordinators	3	24	50%	1.50
Example: Project Directors	2	6	100%	0.50
Field Service Technicians	10	24	100.00%	10.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
TOTAL FTE COUNT				10.00

SUB CONTRACTOR COMPANY NAME				(Enter Company Name Here)
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Example: Developer	2	6	100%	0.50
				0.00
				0.00
				0.00
TOTAL FTE COUNT				0.00

SUB CONTRACTOR COMPANY NAME				(Enter Company Name Here)
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Example: Developer	2	6	100%	0.50
				0.00
				0.00
				0.00
TOTAL FTE COUNT				0.00

SUB CONTRACTOR COMPANY NAME				(Enter Company Name Here)
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Example: Developer	2	6	100%	0.50
				0.00
				0.00
				0.00
TOTAL FTE COUNT				0.00

SUB CONTRACTOR COMPANY NAME				(Enter Company Name Here)
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Example: Developer	2	6	100%	0.50
				0.00
				0.00
				0.00
TOTAL FTE COUNT				0.00