



*David Gee, Sheriff*  
*Jose Docobo, Chief Deputy*

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*P.O. Box 3371*  
*Phone (813)247-8000*  
*www.hcso.tampa.fl.us*

*Hillsborough County*  
*Tampa, Florida 33601*

March 7, 2016

Mr. Scott B. Meister, II  
Russell's Western Wear, Inc.  
6027 N Dale Mabry Hwy  
Tampa, FL 33614

RE: RFP 31-15, Uniform Straw Hats

Dear Mr. Meister,

Thank you for responding to our Request for Proposal, 31-15 for Uniform Straw Hats. Your proposal was reviewed and reviewed by our evaluation team. However, I regret to inform you that the RFP has been canceled and no award will be made at this time.

If you have any further questions, please direct them to our Buyer, Carly Cartwright, at (813) 247-0026.

Sincerely,

A handwritten signature in blue ink, appearing to read "Christina R. Porter".

Christina R. Porter  
Comptroller



FedEx Tracking Number 8089 0384 5195

Form ID No. 0215

MUR1

Sender's Copy

**1 From** Please print and press hard.  
 Date 3.8.16 Sender's FedEx Account Number 1071-1953-1  
 Sender's Name Christina R. Porter Phone ( 813 ) 247-8074  
 Company HILLSBOROUGH COUNTY SHERIFF  
 Address 2008 E 8TH AVE Dept./Floor/Suite/Room \_\_\_\_\_  
 City TAMPA State FL ZIP 33605-3906

**2 Your Internal Billing Reference**  
 First 24 characters will appear on invoice.

**3 To**  
 Recipient's Name Scott B. Meister II Phone ( ) \_\_\_\_\_  
 Company Russell's Western Wear, Inc.  
 Address 6027 N Dale Mabry Hwy. HOLD Weekday FedEx location address REQUIRED. NOT available for FedEx First Overnight.  
 We cannot deliver to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room \_\_\_\_\_  
 Address \_\_\_\_\_ HOLD Saturday FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.  
 Use this line for the HOLD location address or for continuation of your shipping address.  
 City Tampa State FL ZIP 33614

0120628067



**4 Express Package Service** \* To most locations. **Packages up to 150 lbs.**  
 NOTE: Service order has changed. Please select carefully. For packages over 150 lbs., use the new FedEx Express Freight US Airbill.

Next Business Day	2 or 3 Business Days
<input type="checkbox"/> <b>FedEx First Overnight</b> Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.	<input type="checkbox"/> <b>FedEx 2Day A.M.</b> Second business morning.* Saturday Delivery NOT available.
<input type="checkbox"/> <b>FedEx Priority Overnight</b> Next business morning.* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.	<input type="checkbox"/> <b>FedEx 2Day</b> Second business afternoon.* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
<input checked="" type="checkbox"/> <b>FedEx Standard Overnight</b> Next business afternoon.* Saturday Delivery NOT available.	<input type="checkbox"/> <b>FedEx Express Saver</b> Third business day.* Saturday Delivery NOT available.

**5 Packaging** \* Declared value limit \$500.  
 FedEx Envelope\*  FedEx Pak\*  FedEx Box  FedEx Tube  Other

**6 Special Handling and Delivery Signature Options**

**SATURDAY Delivery**  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

**No Signature Required**  
 Package may be left without obtaining a signature for delivery.

**Direct Signature**  
 Someone at recipient's address may sign for delivery. **Fee applies.**

**Indirect Signature**  
 If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. **Fee applies.**

**Does this shipment contain dangerous goods?**  
Use box must be shipped.

**No**  **Yes** As per attached Shipper's Declaration.  **Yes** Shipper's Declaration not required.  **Dry Ice** Dry ice, 9, UN 1845 \_\_\_\_\_ x \_\_\_\_\_ kg  
 Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.  **Cargo Aircraft Only**

**7 Payment Bill to:**

**Sender** Acct. No. in Section 1 will be billed.  **Recipient**  **Third Party**  **Credit Card**  **Cash/Check**

Enter FedEx Acct. No. or Credit Card No. below. Exp. Date \_\_\_\_\_

FedEx Acct. No. \_\_\_\_\_ Credit Card No. \_\_\_\_\_

Total Packages \_\_\_\_\_ Total Weight \_\_\_\_\_ Total Declared Value† \_\_\_\_\_

†Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

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PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.