

**AUTHORIZED DEALERS/DISTRIBUTORS LIST**

**MANUFACTURER'S NAME:** Sheldon Laboratory Systems  
**CONTRACT NAME:** LABORATORY EQUIPMENT AND SUPPLIES  
**TERM OF CONTRACT:** October 1, 2015 - September 30, 2016

DEALER/DISTRIBUTOR NAME	CONTACT NAME	ADDRESS	CITY/STATE/ZIP	TELEPHONE	FAX	EMAIL
Sheldon Laboratory Systems	Jeff Smith	102 Kirk Street	Crystal Springs, MS 39059	601-892-7123	601-892-3316	jsmith@sheldonlabs.com

(Sheldon is direct distributor or our products)

MINORITY VENDOR

NA