



### WHO IS CANOE?

- Cooperative buying group
- ❖ Not-for-profit
- Started in 1936
- Over 5,000 members across Canada, that include:
  - Urban and Rural Municipalities
  - School Districts
  - Regional Districts
  - Not-for-Profit Organizations
  - Band Governments
- Sourcewell's Canadian Partner





## **HOW DO WE HELP?**

#### Save you money

 Aggregated buying power across Canada, and as a result, have received preferred pricing for members.

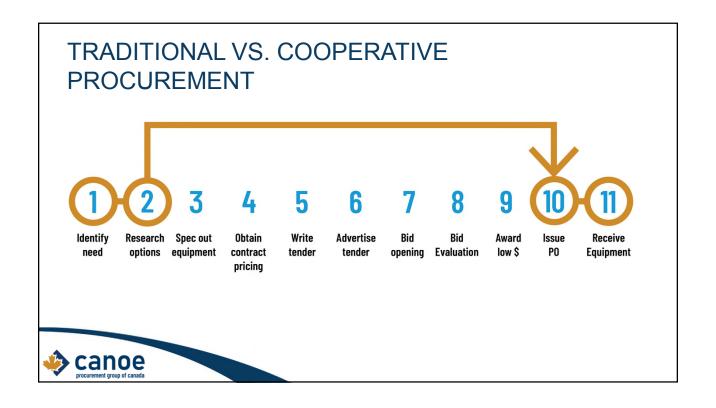
#### ❖ Save you time

- We go to tender on behalf of our members, so you do not have to.
  - BC BID
  - MERX
  - SaskTenders
  - Alberta Purchasing Connection
  - Service NB

#### **❖** Additional Benefits

- Access to a wide variety of suppliers (200+)
- Continue to work with local distributors
- Member support throughout purchase process
- No membership fee
- Free quotes, cost analysis, member assessments
- No minimum purchasing requirements/commitments







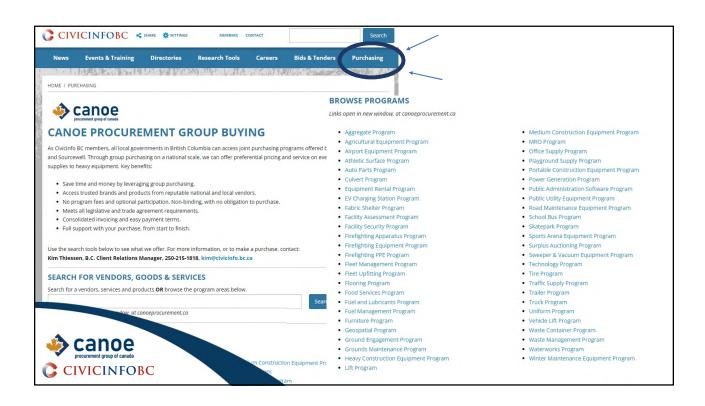




# **Capital Purchasing Program**

- Canoe posts the RFP solicitation concurrently with Sourcewell
- Sourcewell has over 50,000 members
- Contract number will be provided on every quote, PO and final invoice
- Best value contracts
- Trade-ins are available for additional discounts
- Warranties are in place the same, as if you tendered yourself
- Supplier contracts in any category can be compared





MEMBERSHIP FORM	
In partnership with local municipal associations across the country, the Canoe Procurement Group of Canada works with municipal, not-for-profit, and public sector organizations secure preferential pricing and service by combining the purchasing power of its entire membership to creata an encountry of scale.	
To join, please fill out the information below (all fields are required) and return it to your local Client Relations Manager. There is no minimum purchase required.	
If your organization has existing accounts with approved suppliers in good standing, you can transfer those accounts over to your Canne account for improved discounts. Talk to your Client Relations Manager for more details.	
BILL-TO	
FULL NAME: DATE:	
POSITION: PHONE E:	
<u>EMAIL:</u>	Anna
ORGANIZATION:	
FULL ADDRESS: POSTAL CODE:	
SHIP-TO	
FULL NAME DATE:	
POSITION: PHONE E:	
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*FULL ADDRESS: POSTAL CODE	dural Marinda
*Please provide a physical address. Orders cannot be shipped to PO boxes.	
SIGNATURE OF AUTHORIZED INDIVIDUAL (By 1 ying your full name into the digital agenture field above, you confrom the information on this form is accurate and binding.)	
POSITION / TITLE DATE	
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