**Attachment XX – Offer and Acceptance Form**

**SUBMISSION OF OFFER:** The Undersigned hereby offers and agrees to provide Title in compliance with all terms, conditions, specifications, and amendments in the Solicitation and any written exceptions in the Offer indicated by the latest dated version below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Initial Offer:** |  |  |  |
| Date | Signature |
| **Revised Offers:** |  |  |  |  |
| Date | Signature | Date | Signature |
|  |  |  |  |
| Date | Signature | Date | Signature |
| **Best and Final Offer:** |  |  |  |
| Date | Signature |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Offeror company name |  | Signature of person authorized to sign Offer |
|  |  |  |
| Address |  | Printed name and Title |
|  |  |  |
| City, State, ZIP |  | Contact name and Title |
|  |  |  |  |
| **CERTIFICATION:** By signature in the above, Offeror certifies that it: |  | Contact email address | Contact phone number |

1. Will not discriminate against any employee or applicant for employment in violation of Federal Executive Order 11246, [Arizona] State Executive Order 2009-9 or A.R.S. §§ 41-1461 through -1465;
2. Has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or Service to a public servant in connection with the submitted offer. Failure to provide a valid signature affirming the stipulations required by this clause will result in rejection of the Offer. Signing the Offer with a false statement will void the Offer, any resulting contract, and may be subject to legal penalties under law;
3. Complies with A.R.S. § 18-132 when offering electronics or information technology products, Services, or maintenance;
4. Has submitted this Offer as a firm offer for 180 days following the Solicitation due date and time. After 180 days, the Offer will remain open unless revoked by Offeror via written withdrawal of Offeror’s proposal in accordance with the Arizona Procurement Code;
5. Did not and will not involve collusion or other anti-competitive practices; and
6. Is not debarred from, or otherwise prohibited from, participating in any contract awarded by federal, state, or local government.

 **ACCEPTANCE OF OFFER**

The offer is hereby accepted.

The Contractor is now bound to sell the Materials or Services listed by the attached Contract and based upon the Solicitation, including all terms, conditions, specifications, amendments, etc., and the Contractor’s Offer as accepted by the State.

|  |  |
| --- | --- |
| The Contract shall henceforth be referred to as Contract No. |  |
| The effective date of the Contract is |  |

The Contractor is cautioned not to commence any billable work or to provide any Material or Service under this Contract until Contractor receives purchase order, contract release document, or written notice to proceed.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **State of Arizona Awarded this** |  | **day of** |  | **20** |  |

|  |
| --- |
| Procurement officer signature |

**Attachment XX – Boycott of Israel Disclosure**

**Please note that** **if any of the following apply to this Solicitation, Contract, or Contractor, then the Offeror shall select the “Exempt Solicitation, Contract, or Contractor” option below:**

* The Solicitation or Contract has an estimated value of less than $100,000;
* Contractor is a sole proprietorship;
* Contractor has fewer than ten (10) employees; or
* Contractor is a non-profit organization.

Pursuant to A.R.S. § 35-393.01, public entities are prohibited from entering into contracts “unless the contract includes a written certification that the company is not currently engaged in, and agrees for the duration of the contract to not engage in, a boycott of Materials or Services from Israel.”

Under A.R.S. § 35-393:

1. "Boycott" means engaging in a refusal to deal, terminating business activities or performing other actions that are intended to limit commercial relations with entities doing business in Israel or in territories controlled by Israel, if those actions are taken either:

(a) Based in part on the fact that the entity does business in Israel or in territories controlled by Israel.

(b) In a manner that discriminates on the basis of nationality, national origin or religion and that is not based on a valid business reason.

2. "Company" means an organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, limited liability company or other entity or business association, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate, that engages in for-profit activity and that has ten or more full-time employees.

**…**

5. "Public entity": (a) Means this State, a political subdivision of this State or an agency, board, commission or department of this State or a political subdivision of this State. (b) Includes the universities under the jurisdiction of the Arizona board of regents and community college districts as defined in section 15-1401.

The certification below does not include boycotts prohibited by 50 United States Code Section 4842 or a regulation issued pursuant to that section. *See* A.R.S. § 35-393.03.

**In compliance with A.R.S. § 35-393 *et seq*., all Offerors must select one of the following:**

|  |  |
| --- | --- |
| **☐** | The Company submitting this Offer **does not** participate in, and agrees not to participate in during the term of the contract, a boycott of Israel in accordance with A.R.S. § 35-393 *et seq*. I understand that my entire response will become a public record in accordance with A.A.C. R2-7-C317; |
| **☐** | The Company submitting this Offer **does** participate in a boycott of Israel as described in A.R.S. § 35-393 *et seq*.; or |
| **☐** | **Exempt Solicitation, Contract, or Contractor.** Indicate which of the following statements applies to this Contract (may be more than one): |
|  | **☐** | Solicitation or Contract has an estimated value of less than $100,000; |
|  | **☐** | Contractor is a sole proprietorship; |
|  | **☐** | Contractor has fewer than ten (10) employees; or  |
|  | **☐** | Contractor is a non-profit organization. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |
|  |  |  |
| Address |  | Printed name and Title |
|  |  |  |
| City, State, ZIP |  | Contact email address | Contact phone number |

**Attachment XX – Forced Labor of Ethnic Uyghurs Ban**

**Please note that** **if any of the following apply to the Contractor, then the Contractor shall select the “Exempt Contractor” option below:**

* Contractor is a sole proprietorship;
* Contractor has fewer than ten (10) employees; OR
* Contractor is a non-profit organization.

**Pursuant to A.R.S. § 35-394, written certification is required to show that the company entering into a contract with a public entity does not use the forced labor, or use any contractors, subcontractors or suppliers that use the forced labor or any goods or services produced by the forced labor or any goods or services produced by the forced labor, of ethnic Uyghurs in the People's Republic of China.**

Under A.R.S. § 35-394:

1. "Company" means an organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, limited liability company or other entity or business association, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate, that engages in for-profit activity and that has ten or more full-time employees.

2. "Public entity" means this State, a political subdivision of this State or an agency, board, commission or department of this State or a political subdivision of this State.

**In compliance with A.R.S. § 35-394, all Contractors must select one of the following:**

|  |  |
| --- | --- |
| **☐** | The Company **does not** use, and agrees not to use during the term of the contract, any of the following: * Forced labor of ethnic Uyghurs in the People’s Republic of China;
* Any goods or services produced by the forced labor of ethnic Uyghurs in the People’s Republic of China; or
* Any Contractors, Subcontractors, or suppliers that use the forced labor or any goods or services produced by the forced labor of ethnic Uyghurs in the People’s Republic of China.
 |
| **☐** | The Company **does** participate in the use of Forced Uyghurs Labor as described in A.R.S. § 35-394. |
| **☐** | **Exempt Contractor:** **Select all statements that** apply to the Contractor: |
|  | **☐** | Contractor is a sole proprietorship; |
|  | **☐** | Contractor has fewer than ten (10) employees; and/or  |
|  | **☐** | Contractor is a non-profit organization. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |
|  |  |  |
| Address |  | Printed name and Title |
|  |  |  |
| City, State, ZIP |  | Contact email address | Contact phone number |

**Attachment XX – Confidential Information Designation**

All materials submitted as part of a response to a solicitation are subject to Arizona public records law and will be disclosed if there is an appropriate public records request at the time of or after the award of the contract. Recognizing there may be materials included in a solicitation response that are proprietary or a trade secret, a process is set out in A.A.C. R2-7-103 (copy attached) that will allow qualifying materials to be designated as confidential and excluded from disclosure. For purposes of this process the definition of “trade secret” will be the same as that set out in A.A.C. R2-7-101(51).

Complete this form and return it with your Offer **along with the appropriate supporting information** to assist the State in making its determination as to whether any of the materials submitted as part of your Offer should be designated confidential because the material is proprietary or a trade secret and therefore not subject to disclosure.

**STATE WILL NOT CONSIDER ANY MATERIAL IN YOUR OFFER “CONFIDENTIAL” UNLESS DESIGNATED ON THIS FORM.**

**Check one of the following – if neither is checked, State will assume that it is equivalent to “DOES NOT”:**

|  |  |
| --- | --- |
| **☐** | This response DOES NOT contain proprietary or trade secret information. I understand that my entire response will become public record in accordance with A.A.C. R2-7-C317; or |
| **☐** | This response DOES contain trade secret information because it contains information that:1. Is a formula, pattern, compilation, program, device, method, technique or process;
2. Derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons who can obtain economic value from its disclosure or use; and
3. Is the subject of efforts by myself or my organization that are reasonable under the circumstances to maintain its secrecy.
 |

NOTE: Failure to attach an explanation may result in a determination that the information does not meet the statutory trade secret definition. All information that does not meet the definition of trade secret as defined by A.A.C. R2-7-101(51) will become public in accordance with A.A.C. R2-7-C317. State may make its own determination on materials in accordance with A.A.C. R2-7-103.

If State agrees with Offeror’s designation of trade secret or confidentiality and the determination is challenged, the undersigned hereby agrees to cooperate and support the defense of the determination with all interested parties, including legal counsel or other necessary assistance.

By submitting this response, Offeror agrees that the entire Offer, including confidential, trade secret, and proprietary information may be shared with an evaluation committee and technical advisors during the evaluation process. Offeror agrees to indemnify and hold State, its agents and employees, harmless from any claims or causes of action relating to State’s withholding of information based upon reliance on the above representations, including the payment of all costs and attorney fees incurred by State in defending such an action.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |
|  |  |  |
| Address |  | Printed name and Title |
|  |  |  |
| City, State, ZIP |  | Contact email address | Contact phone number |

 **Attachment – Confidential Information Designation (for reference only)**

A.A.C. R2-7-103 [Confidential Information] as was current at time of Solicitation issuance

1. *If a person wants to assert that a person's offer, specification, or protest contains a trade secret or other proprietary information, a person shall include with the submission a statement supporting this assertion. A person shall clearly designate any trade secret and other proprietary information, using the term "confidential". Contract terms and conditions, pricing, and information generally available to the public are not considered confidential information under this Section.*
2. *Until a final determination is made under subsection (C), an agency chief procurement officer shall not disclose information designated as confidential under subsection (A) except to those individuals deemed by an agency chief procurement officer to have a legitimate state interest.*
3. *Upon receipt of a submission, an agency chief procurement officer shall make one of the following written determinations:*
	1. *The designated information is confidential and the agency chief procurement officer shall not disclose the information except to those individuals deemed by the agency chief procurement officer to have a legitimate state interest;*
	2. *The designated information is not confidential; or*
	3. *Additional information is required before a final confidentiality determination can be made.*
4. *If an agency chief procurement officer determines that information submitted is not confidential, a person who made the submission shall be notified in writing. The notice shall include a time period for requesting a review of the determination by the state procurement administrator.*
5. *An agency chief procurement officer may release information designated as confidential under subsection (A) if:*
	1. *A request for review is not received by the state procurement administrator within the time period specified in the notice; or*
	2. *The state procurement administrator, after review, makes a written determination that the designated information is not confidential.*

**- - -**

**Attachment XX – Conformance Statements**

**If taking exceptions, the relevant subsequent pages titled “Attachment Supplements” must be completed. Attach additional pages as needed.**

**STATE WILL NOT CONSIDER ANY EXCEPTIONS UNLESS DESIGNATED ON THIS FORM.**

**READ ALL INSTRUCTIONS TO OFFERORS BEFORE TAKING ANY EXCEPTIONS. OFFERS WITH EXCEPTIONS MAY BE FOUND NOT SUSCEPTIBLE FOR AWARD UNDER A.A.C. R2-7-C311 OR RECEIVE LOWER SCORES DURING EVALUATION.**

**IF NEITHER BOX IS CHECKED UNDER ANY SECTION BELOW, THE OFFEROR’S RESPONSE TO THAT SECTION WILL BE CONSIDERED “YES” AND STATE WILL INTERPRET THE OFFER AS IF THERE WERE NO EXCEPTIONS TAKEN.**

|  |
| --- |
| **CONFORMANCE TO THE INSTRUCTIONS TO OFFERORS** |
| **Check one of the following:** |
| **☐** | YES – Offeror acknowledges that it has read and understands the Special Instructions to Offerors and Uniform Instructions to Offerors of the Solicitation Documents and attests that its Offer complies with both. |
| **☐** | NO – Offeror acknowledges that it has read and understands the Instructions to Offerors in the Solicitation Documents, and attests that its Offer complies with both EXCEPT FOR the exceptions listed in **Attachment Supplement – Conformance Statements - Exceptions to Instructions**. |

|  |
| --- |
| **CONFORMANCE TO THE SCOPE OF WORK** |
| **Check one of the following:** |
| **☐** | YES – Offeror acknowledges that it has read and understands the Scope of Work Document and the Pricing Document of the Solicitation Documents and attests that its Offer complies with both. |
| **☐** | NO – Offeror acknowledges that it has read and understands the Scope of Work Document and the Pricing Document of the Solicitation Documents and attests that its Offer complies with both EXCEPT FOR the exceptions listed in **Attachment Supplement – Conformance Statements - Exceptions to Scope of Work**. |

|  |
| --- |
| **CONFORMANCE TO THE CONTRACT TERMS AND CONDITIONS** |
| **Check one of the following:** |
| **☐** | YES – Offeror acknowledges that it has read and understands the Special Terms and Conditions and the Uniform Terms and Conditions, along with their respective Exhibits and Appendices of the Solicitation Documents and attests that its Offer complies with all. |
| **☐** | NO – Offeror acknowledges that it has read and understands the Special Terms and Conditions and the Uniform Terms and Conditions, along with their respective Exhibits and Appendices of the Solicitation Documents and attests that its Offer complies with all EXCEPT FOR the exceptions listed in **Attachment Supplement – Conformance Statements - Exceptions to Contract Terms and Conditions**. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |

**Attachment Supplement XX – Conformance Statements - Exceptions to Instructions**

|  |  |  |
| --- | --- | --- |
| **Article / paragraph or exhibit reference** | **RFP language (Copy and paste from Solicitation)** | **Alternate language and Rationale** |
| **Special Instructions to Offerors** |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **Uniform Instructions to Offerors** |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |

**Attachment Supplement XX – Conformance Statements -**

**Exceptions to Scope of Work**

|  |  |  |
| --- | --- | --- |
| **Article / paragraph or exhibit reference** | **RFP language (Copy and paste from Solicitation)** | **Alternate language and Rationale** |
| **Scope of Work** |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |

**Attachment Supplement XX – Conformance Statements - Exceptions to**

**Contract Terms and Conditions**

|  |  |  |
| --- | --- | --- |
| **Article / paragraph or exhibit reference** | **RFP language (Copy and paste from Solicitation)** | **Alternate language and Rationale** |
| **Special Terms and Conditions** |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **Uniform Terms and Conditions** |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |
| **X** | X | Alternate language: XRationale: X |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company name |  | Signature of person authorized to sign |

**Attachment XX – Key Personnel**

Answer all questions thoroughly in the spaces provided. **Complete this form in full for each one of the key personnel proposed to be involved in performing the Services**. Insert or attach a separate resume as applicable, but any attached resumes are supplemental to this form and do not substitute for this form. If there are more than three (3) Key Personnel, please utilize the same form for each additional Personnel by making copies of this page as needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **Name:** | X | Job title: | X |
| Length of employment with the company: | X years | Length of time in current role: | X years |
| Proposed percentage of overall time to be dedicated to the Services: | X % | If applicable, length of time in related experience with large local, state or federal government agencies: | X years |
| Proposed position with regard to the Services: | X |
| Proposed primary responsibilities with regard to the Services: | X |
| Describe experience in performing Services similar to those that are to be assigned: | X |
| List job-related certifications, training, and education: | X |
| **Resume:** | filename |

**Attachment XX – Key Personnel**

Answer all questions thoroughly in the spaces provided. **Complete this form in full for each one of the key personnel proposed to be involved in performing the Services**. Insert or attach a separate resume as applicable, but any attached resumes are supplemental to this form and do not substitute for this form. If there are more than three (3) Key Personnel, please utilize the same form for each additional Personnel by making copies of this page as needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2** | **Name:** | X | Job title: | X |
| Length of employment with the company: | X years | Length of time in current role: | X years |
| Proposed percentage of overall time to be dedicated to the Services: | X % | If applicable, length of time in related experience with large local, state or federal government agencies: | X years |
| Proposed position with regard to the Services: | X |
| Proposed primary responsibilities with regard to the Services: | X |
| Describe experience in performing Services similar to those that are to be assigned: | X |
| List job-related certifications, training, and education: | X |
| **Resume:** | filename |

**Attachment XX – Key Personnel**

Answer all questions thoroughly in the spaces provided. **Complete this form in full for each one of the key personnel proposed to be involved in performing the Services**. Insert or attach a separate resume as applicable, but any attached resumes are supplemental to this form and do not substitute for this form. If there are more than three (3) Key Personnel, please utilize the same form for each additional Personnel by making copies of this page as needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3** | **Name:** | X | Job title: | X |
| Length of employment with the company: | X years | Length of time in current role: | X years |
| Proposed percentage of overall time to be dedicated to the Services: | X % | If applicable, length of time in related experience with large local, state or federal government agencies: | X years |
| Proposed position with regard to the Services: | X |
| Proposed primary responsibilities with regard to the Services: | X |
| Describe experience in performing Services similar to those that are to be assigned: | X |
| List job-related certifications, training, and education: | X |
| **Resume:** | filename |

**Attachment XX – Letter of Insurability**

The Offeror shall provide a Letter of Insurability from the Insurance Company as a proof that the Offeror currently possesses the required insurance as stated in Section 6.2 of the Special Terms and Conditions or the Offeror is able to obtain the required Minimum Scope and Limits of Insurance should a contract be awarded to them.

**The** **Letter of Insurability (and any additional letters) should be clearly marked as:**

**Attachment - Supplement Insurance**

**NOTE:** Awarded Contractors shall provide a Certificate of Insurance (e.g. ACORD forms) and associated policy endorsement(s) **electronically** prior to beginning Service(s) or performing any other work under the Contract. Contractors shall also provide updated Certificates of Insurance **electronically**, so the State has current Certificates of Insurance as required under the Contract.

Attachment XX – Organization Profile

|  |  |  |  |
| --- | --- | --- | --- |
| **Organization name:**  | X | Year established: | X |
| Principal address (street, city, state, ZIP): | X |
| Branch or division: | X | Parent company or owner: | X |
| Years of experience providing Materials or Services similar in type and quantity as required by this Solicitation: | X years |
| Years of experience performing Services similar in size and scope as required by this Solicitation: | X years |
| Years the organization has conducted business in Arizona: | X years |
| **Contract Representatives** |
|  | Name | Title | Phone number | Email address |
| 1. | X | X | X | X |
| 2. | X | X | X | X |
| 3. | X | X | X | X |
| **Licenses/Certifications** |
|  | Description | Issuer | Number | Expiration |
| 4. | X | X | X | X |
| 5. | X | X | X | X |
| 6. | X | X | X | X |
| 7. | X | X | X | X |
| 8. | X | X | X | X |
| **Financial Information (attach financial statements with income/balance sheets as Supplements)** |
|  | Rating/Issuer | Score/Rank | Date |
| 9. | X | X | X |
| 10. | X | X | X |
| **Capacity** |
|  | Location | Work performed | Number of staff | Capacity  |
| 11. | X | X | X | X |
| 12. | X | X | X | X |
| 13. | X | X | X | X |

**Attachment XX – Proposed Subcontractors**

Check “NO” if you WILL NOT subcontract any portion of the Work and will therefore be performing all of the Work with your own personnel.

|  |  |
| --- | --- |
| **☐** | NO, the Offeror will not subcontract any portion of the Work. |

If you WILL subcontract any portion of the Work, check “YES” below and list the name(s) of persons or companies you propose to use as Subcontractors.

1. Fill in the information for each significant Subcontractor – indicate the type of work the Subcontractor will perform under the Contract and their approximate percentage of the total Contract work;
2. Provide copies of relevant certifications each person or firm possesses attached to this form; AND
3. Provide a description of quality assurance (QA) and quality control (QC) measures that you will use to ensure that Subcontractor’s work meets the Contract requirements.

State may demand additional information about proposed Subcontractors as a precondition of Award.

|  |  |
| --- | --- |
| **☐** | YES, the Offeror will use the Subcontractors listed below:  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Name and contact information** | **Small business** | **Work to be performed and QA/QC measures** | **%** |
| **1.** | [Name][Contact information] | Yes or No  | [Work to be performed][QA/QC measures] | X |
| **2.** | [Name][Contact information] | Yes or No  | [Work to be performed][QA/QC measures] | X |
| **3.** | [Name][Contact information] | Yes or No  | [Work to be performed][QA/QC measures] | X |
| **4.** | [Name][Contact information] | Yes or No  | [Work to be performed][QA/QC measures] | X |
| **5.** | [Name][Contact information] | Yes or No  | [Work to be performed][QA/QC measures] | X |

Attachment XX – Experience and Capacity Response

**THE STATE MAY DETERMINE YOUR PROPOSAL NON-RESPONSIVE IF YOU DO NOT FULLY RESPOND**.

The Offeror shall provide a narrative response to each section that demonstrates their understanding of the Scope of Work requirements and describes the company’s overall experience and capacity in providing the Services stated in this Solicitation. If there is a section that is not applicable to the Services required by the Scope of Work, you may mark it “N/A”.

**Offeror shall provide a response either after each section or in a separate document entitled: “Attachment - Experience and Capacity Response.” If a separate document is used, please clearly designate each section and double-check to ensure that each question has been answered. If any information provided is considered CONFIDENTIAL by Offeror, the information must be specifically included in the Confidential Information Designation Attachment and related documentation to be assessed for confidential treatment under A.A.C. R2-7-103.**

**1.0 Company Profile.** The Offeror must include a narrative description of its organization. The narrative must include the following:

1. Brief overview of business operations, with an emphasis on experience in regards to the Scope of Work;
2. Location in which the Offeror is incorporated;
3. Address of “Main Office” (e.g. Corporate Headquarters and any satellite offices responsible for performance of proposed tasks;
4. Offeror's organizational chart relevant to the Contract, specifically identifying the key point of contact for all questions related to the submitted Offer;
5. Full disclosure of any potential conflict of interest between the Offeror and any State employee who functions or has responsibilities in the review or approval of the undertaking or carrying out of the Contract;
6. A Statement of whether, in the last five (5) years, the Offeror has filed (or had filed against it) any bankruptcy or insolvency proceeding, whether voluntary or involuntary, or undergone the appointment of a receiver, trustee, or assignee for the benefit of creditors, and if so, an explanation providing relevant details and current status;
7. A Statement of whether there are any pending Securities Exchange Commission investigations involving the Offeror, and if such are pending or in progress, an explanation providing relevant details and an attached opinion of counsel as to whether the pending investigation(s) may impair the Offeror’s performance in a Contract under this Solicitation;
8. A Statement documenting all open or pending litigation initiated by Offeror or where Offeror is a defendant or party in any litigation that may have a material impact on Offeror’s ability to deliver the contracted Services;
9. A Statement documenting all open or pending litigation initiated by Offeror or where Offeror is a defendant or party in any litigation with a public sector client;
10. Full disclosure of any public sector contracts terminated for cause or convenience in the past five (5) years;
11. Full disclosure of any criminal or civil offense;
12. Offeror shall provide evidence of any Arizona required business license to provide these Services; AND
13. Offeror shall provide copies of any professional or industry certifications that represent the Services detailed in this Solicitation.

**Offeror Response:**

X

**2.0 Company Experience**

1. What market(s) are your current clients primarily in?
2. What experience do you have serving clients in business markets within the State of Arizona?
3. What is the range in size of your current clients?
4. Provide two (2) examples that exhibit your experience with Materials or Services for clients relevant to the Scope of Work? Provide supporting documentation as a separate attachment and title the document: “Attachment - Company Experience”.
5. In the last five (5) years, did any of your clients cancel their contracts with your company? If “yes”, why? Please provide as much detail as possible.
6. With what relevant trade and/or professional associations are you involved? How does this participation give you an advantage over your competition?

**Offeror Response:**

X

**3.0 Financial/Accounting Information**

Offeror must provide evidence of financial stability and capability to fund all costs associated with providing the relevant Materials or Services throughout the term of the Contract. The latest two (2) years audited annual financial statements including total revenue, net income, and total assets must be submitted with the Offeror’s proposal. If audited financial data is unavailable, explain in full, the reason and provide the latest non-audited financial information including but not limited to balance sheet, income statement, as well as statements of cash flows, and change in financial position. Include information to attest to the accuracy of the information provided.

Offeror shall provide information regarding any irregularities that were discovered in any accounts maintained by the Offeror on behalf of others. Describe the circumstances and disposition of the irregularities.

**Offeror Response:**

X

**4.0 Certificates/Licenses**

**Submit copies of all applicable certificates and licenses that support Offeror’s ability to provide the proposed Materials or Services. At a minimum, this shall include all certifications and licenses referenced in the Solicitation Attachment - Organization Profile.**

**Offeror Response:**

X

Attachment XX – References

**State intends to conduct reference checks for accounts referenced provided by Offerors. It may, at its sole discretion, contact additional clients not presented as references, including internal state clients.** Offerors shall provide at least three (3) client references for assignments that replicate or mirror the requirements of this Solicitation. **At least one (1) of the projects referenced must be related to public sector work. All references shall be for work received and completed within the last five (5) years.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | Client company/Address | Contact | Begin date | End date |
| X | X | X | X |
| Phone number | Email address |
| X | X |
| Summarize the scope and deliverables provided, including timeline and outcome. |
| X |
| List key Materials or Services provided. |
| X |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2** | Client company/Address | Contact | Begin date | End date |
| X | X | X | X |
| Phone number | Email address |
| X | X |
| Summarize the scope and deliverables provided, including timeline and outcome. |
| X |
| List key Materials or Services provided. |
| X |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3** | Client company/Address | Contact | Begin date | End date |
| X | X | X | X |
| Phone number | Email address |
| X | X |
| Summarize the scope and deliverables provided, including timeline and outcome. |
| X |
| List key Materials or Services provided. |
| X |

Attachment XX – Method of Approach

The Offeror shall provide a narrative response to each section that demonstrates their understanding of the Scope of Work requirements and describes the company’s overall method of approach for providing the Service(s) stated in this Solicitation. If there is a section that is not applicable to the Services required by the Scope of Work, you may mark it “N/A”.

**Offeror shall provide a response either after each section or in a separate document entitled: “Attachment - Method of Approach.” If a separate document is used, please clearly designate each section and double-check to ensure that each question has been answered. If any information provided is considered CONFIDENTIAL by Offeror, the information must be specifically included in the Confidential Information Designation Attachment and related documentation to be assessed for confidential treatment under A.A.C. R2-7-103.**

**1.0 Enter statement or question.**

1. Text
2. Text

**Offeror Response:**

X

**2.0 Enter statement or question.**

1. Text
2. Text

**Offeror Response:**

X

**3.0 Enter statement or question.**

1. Text
2. Text

**Offeror Response:**

X

**4.0 Enter statement or question.**

1. Text
2. Text

**Offeror Response:**

X