| **SUBMISSION OF OFFER:** Undersigned hereby offers and agrees to provide TITLE in compliance with the Solicitation indicated above and our 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 | |
|  |  |  |  |
| Federal tax identifier (EIN or SSN) |  | Contact Email Address | Contact phone number |

**CERTIFICATION:** By signature in the above, Offeror certifies that it:

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. § 41-3532 when offering electronics or information technology products, services, or maintenance; and
4. is not debarred from, or otherwise prohibited from participating in any contract awarded by federal, state, or local government.

**ACCEPTANCE OF OFFER**: State hereby accepts the initial Offer, Revised Offer, or Best and Final Offer identified by the latest date and number at the top of this form (the Accepted Offer). Offeror is now bound (as Contractor) to carry out the Work under the attached Contract, of which the Accepted Offer forms a part. Contractor is cautioned not to commence any billable work or to provide any material or perform any service under the Contract until Contractor receives the applicable Order or written notice to proceed from the Procurement Officer.

| **State’s Contract Number is**: |  |  | **Contract Effective Date:** |  |
| --- | --- | --- | --- | --- |

|  |  |  |
| --- | --- | --- |
| Procurement Officer Signature Award Date |  | Procurement Officer Name Title |

**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 goods 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" 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.

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*.

□ **Exempt Solicitation, Contract, or Contractor.**

Indicate which of the following statements applies to this Contract:

* Solicitation or Contract has an estimated value of less than $100,000;
* 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 |
|  | | |  |  |
| City | State | Zip |  | Title |

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(52).

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 as 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. |
| --- | --- |
|  | This response DOES contain trade secret information because it contains information that:   1. Is a formula, pattern, compilation, program, device, method, technique or process, AND 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(52) 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.

|  |  | | |  |  | |
| --- | --- | --- | --- | --- | --- | --- |
| Offeror Company Name | | | |  | Signature of Authorized Person |
|  |  | | |  |  |
| Address | | | |  | Printed Name |
|  |  | | |  |  |
| City | | State | Zip |  | Title |

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

*A. 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.*

*B. 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.*

*C. 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.*

*D. 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.*

*E. 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.*

**- - -**

**If taking exceptions, the Attachment Supplements must be uploaded as a separate word doc. file titled “Attachment Supplement -”**

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

READ PARAGRAPH 6.8 OF THE INSTRUCTIONS TO OFFERORS BEFORE TAKING ANY EXCEPTIONS – TAKING EXCEPTIONS CAN BE GROUNDS FOR STATE REJECTING OR DOWN-GRADING YOUR OFFER IN EVALUATION.

**CONFORMANCE TO THE INSTRUCTIONS TO OFFERORS**

Check one of the following – if neither is checked, State will assume that as equivalent to “YES”:

|  | 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. |
| --- | --- |
|  | 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 1**. |

**CONFORMANCE TO SCOPE OF WORK AND PRICING**

Check one of the following – if neither is checked, State will assume that as equivalent to “YES”:

|  | 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 2**. |

**CONFORMANCE TO THE CONTRACT TERMS AND CONDITIONS**

Check one of the following – if neither is checked, State will assume that as equivalent to “YES”:

|  | 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 both. |
| --- | --- |
|  | NO – Offeror acknowledges that it has read and understand the Special Terms and Conditions and the Uniform Terms and Conditions, along with their respective Exhibits and Appendices 2 of the Solicitation Documents and attests that its Offer complies with both EXCEPT FOR the exceptions listed in **Attachment Supplement 3**. |

**Exceptions to Instructions**

| **Article / Paragraph or Exhibit Reference** | **Proposed Changes / Alternate Language** | **RFP Language (Copy and Paste from Solicitation)** |
| --- | --- | --- |
| Special Instructions to Offerors | | |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| Uniform Instructions to Offerors | | |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |

| Company Name |  | Signature of Person Authorized to Sign |
| --- | --- | --- |

**Exceptions to Scope of Work and Pricing**

| **Article / Paragraph or Exhibit Reference** | **Proposed Changes / Alternate Language** | **RFP Language (Copy and Paste from Solicitation)** |
| --- | --- | --- |
| Scope of Work | | |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| Pricing Document | | |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
|  | | |

| Company Name |  | Signature of Person Authorized to Sign |
| --- | --- | --- |

**Exceptions to Contract Terms & Conditions**

| **Article/ Paragraph or Exhibit Reference** | **Proposed Changes / Alternate Language** | **RFP Language (Copy and Paste from Solicitation)** |
| --- | --- | --- |
| Special Terms & Conditions | | |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
| Uniform Terms & Conditions | | |
| **x** | X Exception:  Rationale: | x |
| **x** | X Exception:  X Rationale: | x |
|  | | |

| Company Name |  | Signature of Person Authorized to Sign |
| --- | --- | --- |

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 carrying out the Work**. Duplicate as needed. Insert or attach a separate resume if desired, 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.

| **1** | **Name:** | **x** | How long with company? | x years |
| --- | --- | --- | --- | --- |
| Current position in company: | | x | How long in position? | x years |
| Position for the Services: | | x | How much of time will be dedicated to the Services? | x % |
| What primary functions will be assigned? | | x | | |
| Describe person’s experience in performing services like those that are to be assigned: | | x | | |
| List person’s job-related training and education: | | x | | |
| **Resume:** | | filename | | |

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 the Section 6.2 of 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:** If Awarded a Contract, The Offeror shall provide a Certificate of Insurance (e.g. ACORD forms) and associated policy endorsement(s) prior to beginning service(s) under the Contract.

| **Firm Name** | |  | | | | | | | Year established | | | | |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Principal address (street, city, state) | |  | | | | | | | | | | | | |
| Entity type: | |  | | | Structure: | | |  | | | | | | |
| Branch or Division: | |  | | | Parent: | | |  | | | | | | |
| Years of experience providing goods similar in type and quantity as required by this Solicitation. | | | | | | | | | | | | | |  |
| Years of experience performing services similar in size and scope as required by this Solicitation. | | | | | | | | | | | | | |  |
| Years the organization has conducted business in Arizona. | | | | | | | | | | | | | |  |
| **Contract Representatives to Contact** | | | | | | | | | | | | | | |
|  | Name | | Title | | | | Telephone Number | | | E-Mail Address | | | | |
|  |  | |  | | | |  | | |  | | | | |
|  |  | |  | | | |  | | |  | | | | |
|  |  | |  | | | |  | | |  | | | | |
| Licenses/Certifications | | | | | | | | | | | | | | |
|  | Description | | | Issuer | | | | Number | | | | | Expiration | |
|  |  | | |  | | | |  | | | | |  | |
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|  |  | | |  | | | |  | | | | |  | |
| Financial Information (attach financial statements with income/balance sheets as Supplements) | | | | | | | | | | | | | | |
|  | Rating/Issuer | | | | | Score/Rank | | | | | | Date | | |
|  |  | | | | |  | | | | | |  | | |
|  |  | | | | |  | | | | | |  | | |
| Capacity | | | | | | | | | | | | | | |
|  | Location | | | Work Performed | | | | Number Staff | | | Capacity | | | |
|  |  | | |  | | | |  | | |  | | | |
|  |  | | |  | | | |  | | |  | | | |
|  |  | | |  | | | |  | | |  | | | |

Check “NO” if you WILL NOT subcontract any portion of the Work and will therefore be carrying out 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 name(s) of persons or companies you propose to use as subcontractors.

1. Fill in the information for every 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 one possesses in the Attachment Supplements section.
3. Provide description of quality assurance methods and quality control measures that you will use to ensure that Subcontractor work meets the Contract requirements.
4. State may demand additional information about proposed subcontractors as a precondition of award.

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

|  | **Name and contact information** | **Small Business** | **Work to be performed** | **%** |
| --- | --- | --- | --- | --- |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |
|  | Name | select |  |  |

STATE MAY DETERMINE YOUR PROPOSAL IS NON-RESPONSIVE IF YOU DO NOT ANSWER ALL QUESTIONS FULLY.

The Offeror shall provide a narrative response to each question that demonstrates their understanding of the Scope of Work requirements and describes your company’s overall method of approach for providing the service stated in this solicitation. If there is a question that is not applicable to the services required by the Scope of Work, you may mark it N/A.

**Experience and Capacity Questions:**

**Question 1: Company Profile**

The Offeror must include a narrative description of its organization. The narrative must include the following:

1.1 Brief overview of business operations, with an emphasis on experience in regards to the scope of work.

1.2 Date established;

1.3 Ownership (public, partnership, subsidiary, etc.);

1.4 Location in which the Offeror is incorporated;

1.5 Address of “Main Office” (e.g. Corporate Headquarters and any satellite offices responsible for performance of proposed tasks;

1.6 Offeror's organizational chart relevant to the Contract, specifically identifying the key point of contact for all questions related to the submitted offer;

1.7 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;

1.8 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;

1.9 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 RFP;

1.10 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;

1.11 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;

1.12 Full disclosure of any Public Sector contracts terminated for cause or convenience in the past five (5) years; and,

1.13 Full disclosure of any criminal or civil offense.

1.14 Offeror shall provide evidence of any Arizona required business license to provide these services.

1.15 Offeror shall provide copies of any professional or industry certifications that represent the services detailed in this RFP.

**Offeror Response:**

Click here to enter your response.

**Question 2: 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 different types and sizes of (Label) related goods/services for clients?
5. How long have you provided goods/services to your longest tenured client?
6. Why did your last three former clients cancel their contracts?
7. With what relevant trade and/or professional associations are you involved? How does this participation give you an advantage over your competition?

**Offeror Response:**

Click here to enter your response.

**Question 3: Financial/Accounting Information**

Offeror must provide evidence of financial stability and capability to fund all costs associated with providing the 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 to include 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:**

Click here to enter your response.

**Question 4: Proposed Project Members and Organization**

Utilize Attachment 3-B to identify Key Personnel to be utilized to perform services within a resultant contract.

*In addition, also state the Members related experience with large local, state or federal government agencies.*

**Offeror Response:**

Click here to enter your response.

**Question 5: Submit copies of all applicable certificates and licenses that support Offeror’s ability to provide the related goods/services being proposed.**

**Offeror Response:**

Click here to enter your response.

The 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. Offerors shall provide at least three (3) client references for assignments that replicate or mirror the requirements of this RFP. At least one (1) of the projects referenced must be Arizona government related. All assignments shall be for assignments 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 | | | |
|  | | | | | |
| Event Scope and deliverables, include number of resources engaged in project, timeline of project (major milestones) | | | | | |
| x | | | | | |
| List job positions provided and technologies utilized to supplement services. | | | | | |
| x | | | | | |

| **2** | Client Company/Address | | Contact | Begin Date | End Date |
| --- | --- | --- | --- | --- | --- |
| x | | | x | x | x |
| Phone Number | | Email Address | | | |
| x | | x | | | |
|  | | | | | |
| Event Scope and deliverables, include number of resources engaged in project, timeline of project (major milestones) | | | | | |
| x | | | | | |
| List job positions provided and technologies utilized to supplement services. | | | | | |
| x | | | | | |

| **3** | Client Company/Address | | Contact | Begin Date | End Date |
| --- | --- | --- | --- | --- | --- |
| x | | | x | x | x |
| Phone Number | | Email Address | | | |
| x | | x | | | |
|  | | | | | |
| Event Scope and deliverables, include number of resources engaged in project, timeline of project(major milestones) | | | | | |
| x | | | | | |
| List job positions provided and technologies utilized to supplement services. | | | | | |
| x | | | | | |

The Offeror shall provide a narrative response to each question that demonstrates their understanding of the Scope of Work requirements and describes your company’s overall method of approach for providing the service stated in this solicitation. If there is a question that is not applicable to the services required by the Scope of Work, you may mark it N/A.

**Question 1:**

**Offeror Response:**

Click here to enter your response.

**Question 2:**

**Offeror Response:**

Click here to enter your response.

**Question 3:**

**Offeror Response:**

Click here to enter your response.

**Question 4:**

**Offeror Response:**

Click here to enter your response.