



ARLINGTON CLASSICS ACADEMY

Melanie Schroeder
Director of Business Operations

(817)987-1910
mschroeder@acaedu.net

Date: May 11, 2015

Subject: Request for Proposal for Copiers & Copier Services-Multifunctional Devices

Arlington Classics Academy (ACA) invites qualified vendors to submit Proposals for **Copiers & Copier Services-Multifunctional Devices**. Proposals will be received until 2:00 P.M., Friday, June 12, 2015, by the Business Office, Arlington Classics Academy, 5206 South Bowen Road, Arlington, Texas 76017. The envelope containing your Proposal (3 copies) should be plainly marked:

**Proposal for
Copiers & Copier Services-Multifunctional Devices
June 12, 2015**

The District reserves the right to discuss contents of such initial proposals received in order to obtain offers which best meet the District's needs.

The Board of Directors reserves the right to reject any and /or all Proposals, to award contracts for individual products or services as may appear advantageous, and to negotiate separately in any manner necessary to serve the best interest of the District. No Proposals may be withdrawn for a period of ninety (90) days subsequent to the deadline for receipt of Proposals without the prior written consent of the Board of Directors, Arlington Classics Academy.

Respectfully,

Melanie Schroeder
Director of Business Operations



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REQUEST FOR PROPOSAL

The following information must appear on the Proposer's return envelope:

PROPOSAL TITLE: Copiers & Copier Services-Multifunctional Devices
Opening Time: 2:00 pm
Opening Date: June 12, 2015

Contact Information: Melanie Schroeder
Telephone: 817-987-1910
Fax: 817-200-6541
Email: mschroeder@acaedu.net

This invitation include the following sections:

- Section 1-General Requirements & Conditions
- Section 2-Scope of Services
- Section 3- Proposals
- Section 4-Equipment Requirements
- Section 5-Cost Proposal Form
- Section 6- Vendor Questionnaire
- Section 7-Proposal Certification and Representations

Proposer's Certification

The undersigned, by his/her signature, represents that he/she is authorized to bind the Proposer to fully comply with the terms and conditions of this Request for Proposal, including all forms and attachments included and/or referenced herein, if accepted within ninety (90) calendar days after solicitation closing.

Firm Name: _____	Telephone: _____
Address: _____	Or _____
City: _____	Fax: _____
State: _____ Zip: _____	Web Address: _____
_____	Email: _____
(Signature of Person Authorized to Sign Proposal)	Date: _____
Printed Name: _____ (Please print or type)	Title: _____



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Section 1

General Requirements & Conditions

Proposals submitted will be accepted in accordance with the notice provided to all bidders. The person, firm or corporation making such proposal shall submit it in a sealed envelope as specified. The envelope or package containing the proposal must be clearly labeled on the face thereof with the name of the person, firm or corporation making such proposal, the date of its proposal submission and the title: “Copiers & Copier Services-Multifunctional Devices.”

Proposal Submission:

Proposals are to be submitted in TRIPLICATE sealed in the envelope and addressed as follows:

Melanie Schroeder, Director of Business Operations
Administrative Office
Arlington Classics Academy
5206 South Bowen Road
Arlington Texas 76017

Title: “Copiers & Copier Services-Multifunctional Devices”

Questions:

All questions regarding this proposal must be submitted in writing to Melanie Schroeder, Director of Business Operations, mschroeder@acaedu.net. All questions must be received by **Monday, June 1, 2015 at noon**. All questions will be responded to and will be available as an addendum to this proposal on Friday, June 5, 2015, by the end of the business day.

Tax Exempt:

Arlington Classics Academy is exempt from the payment of taxes imposed by the Federal and/or State and/or County taxes. Exemption certificates, if required, will be furnished on forms provided by the vendors.

Term of Contract:

The term of the contract between the vendor and Arlington Classics Academy shall be four (4) years effective **July 15, 2015**. All equipment, service, supplies and training will expire or be coterminous with the term. All prices quoted must be **FIXED** for the entire duration of the term. The monthly copies and/or copy allowance in the prices quote would be only reconciled on an annual basis. All proposals shall be submitted on the “Pricing Form” contained in this specification package.



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Criteria for Award:

- Award will not be based solely on price. Equipment service, reliability and functionality will be strongly considered.
- All Vendors are requested to propose on all items in its entirety. Arlington Classics Academy reserves the right to make awards as a total award in its entirety.
- Arlington Classics Academy reserves the right to reject any or all proposals, and waive any requirements or irregularities or even parts thereof, if in the judgment of Administration, such rejection is in the best interest of the school district.
- Arlington Classics Academy reserves the right to waive an informality or technicality with a specific proposal.
- All decisions as to the quality of equipment, services, supplies and training shall be made by the Administration and such decision shall be final. On submission of the recommendation/proposal, the Vendors/Bidders shall waive the right to protest on the final decision.

Conflict Of Interest

- The vendor must file a Vendor Conflict of Interest Questionnaire with the Arlington Classics Academy Business Office in accordance with Texas Local Government Code Chapter 176, not later than the 7th business day after the recipient becomes aware of facts that require filing.
- This requirement applies to a person who is an agent of a vendor in the vendor's business with the District.
- Forms and additional information are available at <http://www.acaedu.net>.
- Forms are also posted at the Texas Ethics Commission's website at: http://www.ethics.state.tx.us/whatsnew/conflict_forms.htm.
- All Bidders must disclose the name of any ACA employee who owns, directly or indirectly, an interest in the Bidder's firm or any of its branches.
- Failure to provide such information may be grounds for disqualification of the bid or cancellation of a contract resulting from this Solicitation.
- Purchase of services or equipment from a business owned in whole or in part by a District employee shall be permitted only when approved by the Executive Director of Schools and executed through a documented competitive process.
- Services that might be provided by the employee as an extension of the employee's regular job responsibilities is exempted from consideration.



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Section 2

Scope of Service

Arlington Classics Academy has an enrollment of 1400 students (as of March 2015), in grades kindergarten through 8. There are approximately 130 district employees serving in three (3) campus and administrative support service facilities. These campuses are as follows: ACA Administration, ACA Primary (K-2), ACA Intermediate (3-5) and ACA Middle Schools (6-8).

In recent years, Arlington Classics Academy has identified and developed a technology design to lay the foundation for applications that support the District's short-term and long-term educational, administrative, and operational activities. Through a disciplined, detail-oriented process, the district is on an ongoing implementation schedule of its infrastructure design that offers the following benefits. In order to implement the design, this request for proposal incorporates full multifunctional devices that are ready to copy, fax, print, and scan to increase efficiency, productivity, and functionality. The following are the benefits of the technology design incorporating today's requirements as well as looking ahead.

Educational benefits:

- Cognitive learning skills developed through programs that use educational software, electronic libraries, PC-based simulations and experiments and Internet resources.
- Opportunities for members of the community to use the network and computing and printing resources to develop new skills. With a well trained school district, the community will have additional opportunities and a competitive advantage for personal and professional growth.

Administrative benefits:

- Management efficiency and process improvements for information and document management. This is accomplished through applications that address student records, electronic student portfolios, official communications, and printing, faxing, and computing requirements
- Productivity enhancements cost saving programs, and "Best in Class" practices that administrators learn about by using electronic mail and the Internet to communicate with their peers within the district and throughout the country.

Operational benefits:

- Higher levels of service for all network users by implementing network and application standards, network management policies and procedures. This will reduce network support costs.
- Through the use of the network capabilities, centralize digital printing would support the reduction of cost and further enhance district wide productivity.



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To help the district realize the full benefits of a network infrastructure, the goal is to design a printing strategy that supports our current and future networks and addresses the ever changing educational software applications.

Section 3

Proposals

- Prices are being requested for the district for leasing, service, supplies (except transparencies, binding tapes & paper) and training of these devices on a four (4) year term. All prices shall be **FIXED** for the entire term starting July 15, 2015. It is highly recommended that all vendors follow the proposal format and be clear, concise and legible to conform as per the request of Administration.
- All vendors must submit a proposal for a term of 48 Months which shall be **FIXED** for the entire term. The cost must include all equipment, service, supplies (except transparencies, binding tapes & paper), delivery and installation, and training (minimum of 2 sessions per device). The pricing in the proposal should read as “ONE COST PER COPY” for the entire district and “EXCESS COPY CHARGE”.
- Vendors must recommend solutions based on the equipment specifications. All these devices should have the following functionality as a “MINIMUM REQUIREMENT” (Specific details listed in Section 4 – “Equipment Requirements”)
 - Walk up Copying - (all devices)
 - Network Connected - (all devices)
 - Printing Capabilities - (all devices)
 - FAX (Walk-up and LAN Fax) - (all devices)
 - Scan Services - (all devices)
- All vendors must submit in writing their warranty and the guarantee on the proposed products and services and their network support to implement the recommended solution.
- Once notification has been placed by Arlington Classics Academy, the arrival of a repair technician shall not exceed (4) four working hours. Working hours are defined by the district and will be supplied to the bidder upon request. Machines shall be kept in good working order so that work delays and copy problems will be minimized. In the event that a copier is not working properly, including but not limited to breakdowns and poor copying quality, for a period of (1) one month or (5) five service calls, the district reserves the right to reject the copier and request the copier be replaced with an acceptable copier for the remainder of the contract.
- The successful bidder must provide a loaner machine whenever service cannot be provided in a reasonable period of time.



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- The successful bidder will provide training at a minimum of (2) two training sessions per device. Training schedules shall be coordinated by the bidder and each location in which copiers are located.
- All bidders shall provide warranty information for all copiers as the vendor will warranty all equipment for the term of the contract against defect.
- Proposed bidders must describe billing methods in a clear, concise fashion. One monthly invoice will be submitted to the district. The invoice must include an itemization showing at minimum the location of each machine and serial number.

Monthly copy tallies will be performed by the vendor at each location in which a copy machine resides. This information will be gathered at the same time each month and sent to the Arlington Classics Academy, Business Office, 5206 South Bowen Road, Arlington Texas 76017, within (5) five days of the date the information was recorded.

- Throughout the contract, the vendor will provide a service team to effectively manage oversee and maintain all customer service activities. Account managers will be provided by the vendor to oversee activities by employees and others providing service resulting from this bid. Billing specialists will be assigned to assist in difficulties in invoicing and customer services specialists will be provided by the vendor to assist users with device operation.
- Contractor shall be responsible for unloading, unpacking, installation and setup of all copiers in the room and location specified by Administration. Contractor shall remove all cartons and packing materials from the final destination at no cost to ACA. There will be no cost for installation, removal or relocation or equipment during the term of this contract. Contractor shall provide all technical assistance which may be required during the installation and initial use of the equipment.
- In the event future funds are not appropriated for this service, Arlington Classics Academy reserves the right to cancel this contract without penalties of any type upon thirty (30) days written notice to the vendor.

Section 4

Equipment Requirements

The district is interested in receiving proposals for “Copiers & Copier Services-Multifunctional Devices” that is categorized into TWO (2) categories: Please see Equipment Minimum Specifications.

- Vendors must include a complete descriptive brochure for each of the equipment categories. A statement of as to durability or overall reliability documents. Also, if any special installation requirements (wiring, ventilation, etc.) are needed.



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- Equipment **performance and reliability** is a major concern of district personnel. It should be understood that each vendor must provide a **manufacturer's recommended copy volume per month and the reliability based on number of service calls for the copy volume. In addition, all vendors MUST include in writing their warranty and guarantee for replacement of non-performing devices.**
- Arlington Classics Academy reserves the right to alter the composition of the "copier fleet/inventory" if it deems that such a change would better meet the needs of the school district.
- All vendors are required to submit a sample of their "CPC/ Agreement" and the terms and conditions.
- All replacement digital devices can be proposed as New, Newly Manufactured, and/or Factory Produced New Model. Vendors must offer the same warranty and guarantee as New. Vendors are **NOT** allowed to propose Remanufactured or Refurbished digital devices.
- If quoted materials and/or equipment do not meet the specifications on some or all points, the vendor must outline ALL exceptions in a letter, otherwise, it will be presumed that the vendor/bidder is proposing in accordance to all specifications. A vendor/bidder **MUST** provide in the space outlined the manufacturer and model number of each item quoted.
- All equipment must conform to applicable safety and environmental standards established by Federal, State & Local agencies. The vendor **MUST** provide Material Safety Data Sheet (MSDS sheets) on each of the equipment and supplies etc. quoted.
- ALL FULL DIGITAL MULTIFUNCTIONAL DEVICES **MUST BE** ENERGY STAR APPROVED.

Item #1 Equipment Minimum Specifications:

Quantity Needed:	6 (Six)
Minimum Copy Speed:	80 CPM (Black and White only)
Copy Paper Size:	8 ½ x 11, 8 ½ x 14, 11x17
Original Size:	Up to 11 x 17
Multi-Copy Setting:	1-999
Paper Tray Capacity:	Minimum 1000 Sheets
Auto Document Feed:	Yes (Duplex to produce required sets w/o operator intervention)
Auto Duplexing:	Full function 1:2, 2:2, and 2:1
Reduction/Enlargement:	Yes, Open per Mfg.
Book Copy:	Yes
Process:	Dry Toner
Transparency:	Yes
3-Hole Punch:	Yes
Stapler/Sorter:	Yes
User Password/Code:	Yes
Pause/Interrupt:	Standard



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Scanning: Yes
District Network Capability: Yes
Fax Capability: Yes

Item #2 Equipment Minimum Specifications:

Quantity Needed: 3 (Three)

Minimum Copy Speed: 105 CPM (Black and White/Color)
Copy Paper Size: 8 ½ x 11, 8 ½ x 14, 11x17
Original Size: Up to 11 x 17
Multi-Copy Setting: 1-999
Paper Tray Capacity: Minimum 1000 Sheets
Auto Document Feed: Yes (Duplex to produce required sets w/o operator intervention)
Auto Duplexing: Full function 1:2, 2:2, and 2:1
Reduction/Enlargement: Yes, Open per Mfg.
Book Copy: Yes
Process: Dry Toner
Transparency: Yes
3-Hole Punch: Yes
Stapler/Sorter: Yes
User Password/Code: Yes
Pause/Interrupt: Standard
Scanning: Yes
District Network Capability: Yes
Fax Capability: Yes



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Section 5

Cost Proposal Form

*Cost Per Copy: _____ PER B/W COPY/PRINT

Includes Minimum: 4,000,000 copies/prints per school year.

Excess Copy Charge: _____ PER B/W COPY/PRINT

Over & Above Minimum Allowance 4,000,000 copies/prints per school year.

Color Excess Copy Charge: _____ PER COLORCOPY/PRINT

(Lease cost for color copies is to be included in the total lease value. Template is only to be used for defining cost per copy).

* *The Cost per Copy/Print MUST include:*

A Lease Buyout (Principal only) of: \$ _____



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Section 6

Vendor Questionnaire

This section of the RFP requests information on the Vendor's business organization, personnel, experience and references. All responses must be submitted on the forms provided in the RFP or exact copies of the forms.

A. Vendor General Information
(Complete a copy of this section for each major vendor)

1. Vendor _____

a. Company Name: _____

Local Address Serving ACA: _____

Headquarters Address: _____

Contact Representative

Name	Title	Telephone/E-mail
_____	_____	_____
_____	_____	_____

Describe briefly this vendor's roles and responsibilities in conjunction with this Proposal:

b. Company Information

1) How many years has the company provided services _____ Years

2) How many employees will service ACA? _____ Years



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Section 7

Proposer's Certification

Name of Person, Firm or Corporation
Submitting the proposal:

Address:

Telephone #:

This is to certify that:

1. The individual, person, or corporation named above is the only one interested in this proposal, and that no party has any interest herein.
2. This proposal is submitted without any previous understanding agreement or connection with any other individual, firm or corporation submitting a proposal for the same purpose, and is in all respects fair and without collusion or fraud.
3. The party submitting this proposal has carefully examined the instructions, schedules, appendixes and specification prepared under the direction of Arlington Classics Academy, and will, if awarded a contract as a result of this proposal, furnish and deliver at the prices stated herein, all the equipment, lease buyouts, services, supplies, training and other related cost stated for which this proposal is made.
4. The prices listed on the attached documents are exclusive of all Federal, State and Local Taxes.
5. That the individual signing below has reviewed the attached documents and is duly authorized to sign this proposal.

(Authorized Signature)

(Print/ Type Name)

(Name of person, firm or corporation)



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Appendix A
Felony Conviction Notice

State of Texas Legislative Senate Bill No. 1, Section 44.034, Notification of Criminal History, Subsection (a), states "a person or business entity that enters into a contract with a school district must give advance notice to the district if the person or an owner or operator of the business entity has been convicted of a felony. The notice must include a general description of the conduct resulting in the conviction of a felony".

Subsection (b) states "a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract".

THIS NOTICE IS NOT REQUIRED OF A PUBLICLY-HELD CORPORATION

I, the undersigned agent for the firm named below, certify that the information concerning notification of felony convictions has been reviewed by me and the following information furnished is true to the best of my knowledge.

VENDOR'S NAME: _____

AUTHORIZED COMPANY OFFICIAL'S NAME: _____

A. My firm is a publicly-held corporation; therefore, this reporting requirement is not applicable.

Signature of Company Official: _____

B. My firm is not owned nor operated by anyone who has been convicted of a felony.

Signature of Company Official: _____

C. My firm is owned or operated by the following individual(s) who has/have been convicted of a felony.

Name of Felon(s): _____
(Attach additional sheet if necessary.)

Details of Conviction(s): _____
(Attach additional sheet if necessary.)

Signature of Company Official: _____



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Appendix B
Proposal Certification

The undersigned affirms that he or she is duly authorized to execute this questionnaire, that this company, corporation, firm, partnership or individual has not prepared this proposal in collusion with any other person, firm or entity making or considering making a proposal to ACA for any future District projects and that contents of this proposal as to prices, terms or conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal.

The foregoing is true and correct. ACA, or any authorized representative of ACA, is authorized by the undersigned to contact any firm, institution, or person listed above to obtain information that ACA might determine as being desirable.

Firm:

Address:

City/State/Zip:

Phone No:

Fax No:

Email Address:

Typed Name:

Date:



ARLINGTON CLASSICS ACADEMY

Vendor References

Instructions: Complete the reference list as indicated for the 5 most similar organizations that your firm has provided services similar to those required by this RFP. Vendors may, at their discretion, provide additional references. Reference information shall be similar in scope and agency size to what is being proposed for ACA.

Agency Name, Address, Contact, Title, Phone Number	Description of Project	Date(s) of Service
1.		
2.		
3.		
4.		
5.		

Request for Taxpayer Identification Number and Certification

**Give form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
or
Employer identification number

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of
U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.

A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of person who has a business relationship with local governmental entity.

2 Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3 Name of local government officer with whom filer has employment or business relationship.

Name of Officer

This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?

Yes No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

Yes No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

Yes No

D. Describe each employment or business relationship with the local government officer named in this section.

4

Signature of person doing business with the governmental entity

Date