



# SEDGWICK COUNTY, KANSAS

*DIVISION OF FINANCE*

Purchasing Department

604. N. Main, Suite F

Wichita, KS 67203

Telephone: (316)383-7494

Fax (316)383-7055

**ADDENDUM #1**  
**REQUEST FOR BID**  
**03-13741**  
**RSA SECURID KEY FOBS**

November 24, 2003

Attn Vendors:

The original bid response form had the incorrect bid number and the part number was incorrect for the packages of 25 each. Please use the corrected Bid Response Form to submit your responses and acknowledge receipt of this addendum on the Proposal Response Form.

As previously stated should you elect to participate, two (2) copies of the BID RESPONSE FORM with any supporting data, are due on or before 1:45 p.m., CST, Tuesday, December 2, 2003, to Sedgwick County, Kansas, Purchasing Department, 604 N. Main, Suite F, Wichita, KS 67203-3672. Late or incomplete responses will not be accepted and will not receive consideration for final award.

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Kandace K. Johnson, CPPB  
Senior Purchasing Agent

**BID RESPONSE FORM  
03-13741  
RSA SECURID KEY FOBS**

All firms interested in bidding MUST complete two (2) copies of this Bid Response Form and return with any supplementary materials. Responses are due NOT LATER THAN Tuesday, December 2, 2003, at 1:45 p.m. CST. Attention: Kandace Johnson; Purchasing Department, 604 N. Main, Suite F, Wichita, KS, 67203-3672.

The undersigned, on behalf of the Bidder, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm or corporation making a bid on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the bid is entered; (4) they have read the complete Request for Bid and understand all provisions; (5) if accepted by the County, this bid is guaranteed as written and amended and will be implemented as stated;

FIRM NAME: \_\_\_\_\_

CONTACT: \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ HOURS: \_\_\_\_\_

TAXPAYER I.D. NUMBER: \_\_\_\_\_

GENERAL NATURE OF BUSINESS: \_\_\_\_\_

NUMBER OF LOCATIONS: \_\_\_\_\_ NUMBER OF PERSONS EMPLOYED: \_\_\_\_\_

COMPANY WEB SITE ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

*Type or Organization (check all which apply):*

Sole Proprietorship     Partnership     Incorporated     Corporation

MINORITY BUS ENT     WOMAN-OWNED BUS ENT     SMALL BUS ENT

MANUFACTURER     DISTRIBUTOR     RETAIL     DEALER     SERVICE

WE ACKNOWLEDGE RECEIPT OF THESE ADDENDA: NO. \_\_\_\_\_, DATED;  
NO. \_\_\_\_\_, DATED \_\_\_\_\_

**PRICING: Prices must include freight and inside delivery to Sedgwick County Division of Information and Operations, 538 N. Main, 3<sup>rd</sup> floor, Wichita, Ks 67203.**

State number of calendar days for delivery \_\_\_\_\_

**PRICING:**

1 EACH    SD600-60-36-E (Pkg qty 250)    \$ \_\_\_\_\_    \$ \_\_\_\_\_

9 EACH    SD600-6-60-36-B (Pkg qty 25)    \$ \_\_\_\_\_    \$ \_\_\_\_\_

Will pricing be guaranteed for year two (2) ?    YES \_\_\_\_\_    NO \_\_\_\_\_

Will pricing be guaranteed for year three (3)?    YES \_\_\_\_\_    NO \_\_\_\_\_