



**SEDGWICK COUNTY, KANSAS
FINANCE DEPARTMENT**

Purchasing Section

525 N. Main, Suite 823 ~ Wichita, KS 67203

Phone: 316 660-7255 Fax: 316 383-7055

<https://www.sedgwickcounty.org/finance/purchasing/requests-for-bid-and-proposal/>

REQUEST FOR PROPOSAL

#18-0033

SUBSTANCE ABUSE TREATMENT PROGRAM

April 6, 2018

Sedgwick County, Kansas (hereinafter referred to as "County") is soliciting proposals to contract with a qualified vendor(s) to provide Substance Abuse Treatment Services for the City of Derby students and family members. It is anticipated that an official contract and/or purchase order will be issued after Board of County Commission approval of the recommended proposal. It should be noted, however, that the County cannot guarantee the purchase of the services described herein.

Carefully review this document. If your firm is interested in participating in this selection process commensurate with the specifications, conditions, mandatory requirements, and instructions as contained herein, submit one (1) original, five (5) copies, and one (1) electronic copy (pdf or word files on a USB drive) of the entire document with any supplementary materials to:

Britt Rosencutter
Sedgwick County Purchasing Department
525 N. Main, Suite 823
Wichita, KS 67203

SUBMITTALS are due NO LATER THAN 1:45 p.m. CDT, April 24, 2018 Responses must be sealed and marked on the lower left-hand corner with the firm name and address, proposal number, and proposal due date. Late or incomplete responses will not be accepted and will not receive consideration for final award. The time stamp clock in the Purchasing Department will determine the time of receipt.

Proposal responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m., CDT on the due date. No information other than the respondent's name will be disclosed at bid opening.

There will be a **pre-proposal discussion meeting on Monday, April 9, at 10:00am at COMCARE, 271 W 3rd N, MABCD 3rd floor training room, Wichita, Kansas**. This meeting is not required to participate in the solicitation; however it is strongly encouraged that prospective vendors attend to gain a clear understanding of the project scope.

QUESTIONS and CLARIFICATIONS

All requests for clarifications of the RFP process and document content should be directed to Britt Rosencutter at britt.rosencutter@sedgwick.gov. All questions must be submitted in writing by 5:00 p.m. CDT, April 13, 2018. Answers will be provided in written form as an addendum and will be posted on the County website at www.sedgwickcounty.org/purchasing by 5:00 p.m. CDT, April 16, 2018. **Vendors are responsible for checking the web site and acknowledging any addendums in their response.**

Britt Rosencutter
Purchasing Agent

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I. [About this Document](#)

This document is a Request for Proposal. It differs from a Request for Bid or Quotation in that the county is **seeking a solution**, as described on the cover page and in the following Background Information section, **not a bid or quotation meeting** firm specifications for the lowest price. As such, the lowest price proposed will not guarantee an award recommendation. As defined in Charter Resolution No. 68, Competitive Sealed Proposals will be evaluated based upon criteria formulated around the most important features of the product(s) and/or service(s), of which quality, testing, references, service, availability or capability, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a vendor's approach meets the desired requirements and needs of the County. Criteria that will be used and considered in evaluation for award are set forth in this document. The county will thoroughly review all proposals received. The county will also utilize its best judgment when determining whether to schedule a pre-proposal conference, before proposals are accepted, or meetings with vendors, after receipt of all proposals. A Purchase Order/Contract will be awarded to a qualified vendor submitting the best proposal. **Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service(s) and/or product(s) which best meets its required needs, quality levels and budget constraints.**

The nature of this work is for a public entity and will require the expenditure of public funds and/or use of public facilities, therefore the successful proposer will understand that portions (potentially all) of their proposal may become public record at any time after receipt of proposals. Proposal responses, purchase orders and final contracts are subject to public disclosure after award. All confidential or proprietary information should be clearly denoted in proposal responses and responders should understand this information will be considered prior to release, however no guarantee is made that information will be withheld from public view.

II. Background

Sedgwick County is requesting proposals from vendors to offer substance abuse treatment services for students in the Derby school districts and their family members through an initiative supported by the City Special Liquor Tax. As part of the program, youth will be identified by Derby schools as needing substance use intervention. Thereafter, the vendor(s) will evaluate the student and deliver the recommended treatment services. The goal of this program is to help Derby students access the treatment services they may need to make healthy decisions and lead productive lives. Derby schools may also identify a student who is being negatively affected by a direct family member's substance use, and can also refer them to treatment in these situations. Direct family members will include:

- Spouse
- Parent (stepparent)
- Sister (stepsister)
- Brother (stepbrother)
- Grandparent (step-grandparent)
- Aunt (step-aunt)
- Uncle (step-uncle)
- Niece (step- niece)
- Nephew (step-nephew)
- Legal guardian

III. Project Objectives

Through this program, students and their families can get connected to needed treatment and education services which, for a variety of reasons, they may not have otherwise had access to previously. Accordingly, successful vendor will propose services for both adults and adolescents. Services under this contract could include (but are not limited to):

- Assessments/evaluations
- Outpatient adolescent treatment level I
- Outpatient adolescent treatment level II
- Outpatient adult treatment level I
- Outpatient adult treatment level II
- After/continuing care and/or relapse prevention
- Early intervention/educational services

Vendors are asked to propose the treatment and/or prevention services they can offer to students and their families. Up to \$15,000 is available for expenditure, and will be paid out to the selected vendor(s) on a fee for service basis. Expenditures will be monitored closely, as the City of Derby plans on expanding this service for the other schools in the Derby Public School System over the next five years.

Additionally, applicants should be aware that performance under this contract will be monitored using outcome-based measurements. Successful vendors will submit meaningful outcomes for clients to achieve through the treatment and prevention services goals, and will also indicate their willingness and ability to submit performance outcome measures at least bi-annually.

As a partner, selected vendor agree to provide the documentation requested by Derby schools, including a student's level of success in completing the treatment program with the appropriate releases of information in place.

IV. Submittals

Carefully review this Request for Proposal. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) original five (5) copies, **AND** one (1) electronic copy (.PDF/Word supplied on a flash drive) of the entire document with any supplementary materials to:

Britt Rosencutter
Sedgwick County Purchasing Section
525 N. Main, Suite 823
Wichita, KS 67203

SUBMITTALS are due **NO LATER THAN 1:45 p.m. CDT, TUESDAY, April 24, 2018**. Responses must be sealed and marked on the lower left-hand corner with the firm name and address, proposal number, and proposal due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Proposal responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m. CDT, on the due date. No information other than the respondent's name will be disclosed at bid opening.

V. Scope of Work

Agency Identification Information

A. Legal Status: Describe the type of organization that will be providing services under this proposal (i.e. 501(c)3, corporation, government agency, etc.), its mission, and approximate size. Also include where the facility is located, and if there are multiple locations.

B. Financial System: Briefly describe the agency's internal finance system, including structure and experience of key leaders.

Scope of Work

Successful bidders will submit the required information in the format requested. Applications must be submitted on 8.5" by 11" white paper, single-sided, and utilize 12 point font throughout. Pages should be numbered consecutively at the bottom of each page. Narrative sections should be specific and to the point. The Scope of Work section should not exceed 4 pages. Applications should use the order following and identify each section with the heading listed:

- **Cover Sheet**
- **Identification Information**
 - o Legal Status
 - o Financial System
- **Scope of Work (Not exceeding 4 pages)**
 - o Description of Services
 - o Qualifications and Experience
 - o Outcome Measurements
 - o Cost Data
- **Attachments**
 - o A: License from the State of Kansas to provide Treatment Services
 - o B: Outcome Measurements
 - o C: Rate Description
 - o D: State of Kansas Tax Clearance Certification
 - o E: Current Liability Insurance

A. Description of Services

1. Describe the services the agency is willing to provide through this project and the program structure. (i.e. adolescent outpatient treatment level I and II, assessments, alcohol and drug education, etc.) Please include along with the type of service:
 - a. How the agency determines what type of services/length of treatment each client requires;
 - b. Any specific curriculum/evidence-based practices that are used to deliver services;
 - c. Describe how the agency will help client's access treatment at other agencies to address other needs as necessary, including medical, mental health, educational issues, etc.

- d. How/if services are individualized based on the clients' gender and/or cultural background;
 - e. How/if services are individualized for adolescents versus adults.
 - f. When could the agency start delivering services?
2. Detail specifically what kind of after-care and/or relapse prevention services the agency can provide to students (and if working with their families, for adults) up to at least 90 days after successful completion of the program.
 3. Describe if and how the family is involved in the treatment of the client.
 4. If proposing a joint venture, describe the services each agency will provide and how the partnership will operate.

B. Qualifications and Experience

1. Describe the agency's experience in providing the requested services.
2. Submit as Attachment A the facility's license from the State of Kansas to provide treatment services.
3. Identify the staff persons that will be assigned to this project and briefly describe their qualifications. (Please include the staff that will deliver direct services as well as those that provide administrative support, if different.)

C. Outcome Measurements:

1. Using Attachment B, submit with this proposal at least four meaningful and measurable outcomes for the population(s) to be served through these funds.
2. Indicate the agency's experience in using performance based outcomes as a measurement tool. (Note: A lack of experience in this area does not disqualify an agency from funding.)

D. Cost Data

1. Using Attachment C, list the services being offered, the unit of service, and the cost per unit of service.
2. Submit along with this application as Attachment D a copy of the agency's Certificate of Tax Clearance from the State of Kansas (Visit <http://www.ksrevenue.org/taxclearance.html> to obtain this free certificate.)

Also include a copy of the agency's current liability insurance coverage as Attachment E.

VI. Sedgwick County's Responsibilities

- Provide information, as legally allowed, in possession of the County, which relates to the County's requirements or which is relevant to this project.
- Designate a person to act as the County Contract Manager with respect to the work to be performed under this contract.
- County reserves the right to make inspections at various points of the project. Contractor agrees to openly participate in said inspections and provide information to the county on the progress, expected completion date and any unforeseen or unexpected complications in the project.

VII. Proposal Terms

A. Questions and Contact Information

Any questions regarding this document must be submitted in writing to Britt Rosencutter at britt.rosencutter@sedgwick.gov by 5:00 p.m. CDT Friday, April 13, 2018. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at <https://www.sedgwickcounty.org/finance/purchasing/requests-for-bid-and-proposal/> under the Documents column associated with this RFP number by 5:00 p.m. CDT Monday, April 16, 2018. Firms are responsible for checking the website and acknowledging any addenda on their proposal response form.

B. Minimum Firm Qualifications

This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) specified in this Request for Proposal. Firms must meet or exceed these qualifications to be considered for award. Any exceptions to the requirements listed should be clearly detailed in proposer's response. Proposers shall:

1. Hold appropriate qualifications and/or credentials for the delivery of services specified and proposed.
2. Have the capacity to acquire all required bonds, escrows or insurances;
3. Have provided services similar to those specified herein for a minimum of five (5) years; and
4. Maintain ability to provide ongoing services in the manner described within proposal response

5. Be familiar with the laws of the State of Kansas.
6. Provide any licenses and/or certifications required to perform services outlined herein.

These guidelines are provided to assist participating firms in formulating a thorough response. Proposals submitted must reflect in detail their inclusion as well as the degree to which they can be provided. The successful contractor shall ensure and understand:

1. Services must meet local, state, and federal guidelines as applicable.
2. Contractor will work closely with County staff during all phases of the required work. Because the successful firm's service will be considered a key part of business for the public, a strong, positive working relationship must be maintained.
3. Contractor will provide a single point of contact for the duration of the contract.
4. Contractor shall have the ability to manage multiple tasks simultaneously and expeditiously, approach to problem and task resolution, methodology and proven procedures, and a cultural teamwork philosophy.

Contractor shall not acquire any interest, direct or indirect, in any other professional capacity that would conflict in any manner or degree with the performance of services required to be performed during this project.

C. Evaluation Criteria

County has organized a selection team (hereinafter referred to as "team") that includes a variety of stakeholders in the City of Derby to review and select vendors under this RFP. The team reserves the right, were it may serve the team's best interest through the evaluation process to:

- Make an award based on maximum benefit to the City and not automatically on the lowest cost;
- Select or reject any or all applications submitted in response to this RFP;
- Accept part of a particular proposal;
- Select one or more than one vendor to provide a specified service;
- Request additional information or clarification from one or more bidding agencies;
- Retain all applications submitted in response to this RFP.

The following criteria will be used to guide reviewers in the selection of programs recommended for funding under this RFP:

A. Mandatory Elements

- The agency has no conflict of interest with the City of Derby or Sedgwick County.
- The agency submits a response that adheres to the directions of the RFP, and provides a proposal that is clear, complete, and provides all of the requested information.

B. Technical Qualifications

- The agency is licensed in the State of Kansas to provide adult and/or adolescent substance abuse treatment services, and this license is current and in good standing.
- Staff assigned to the project will demonstrate they have the required licenses, degrees, and other certifications necessary to provide adequate services.
- Agency demonstrates the competencies and capacity for providing the requested services.

C. Program Content

- Agency proposes sufficient treatment services that meet the needs of the students and their family members to be served under this RFP.
- Proposed services are clearly described along with a clear goal for clients receiving said services.
- Agency offers strong after-care/relapse prevention support services to clients for at least 90 days after their successful completion of treatment.
- Agency submits at least four meaningful outcome goals for those clients served.
- Agency indicates their willingness and ability to successfully and independently track and report on the requested performance outcome data.

D. Price

- The proposed rates for services are reasonable and commensurate with market prices.
- Agency demonstrates cost-effectiveness.

E. Additional Considerations

Agency incorporates evidence-based practices in their service delivery where possible and appropriate.

Component	Points
Mandatory Elements	20
Technical Qualifications	20
Program Content	20
Price*	20
Additional Considerations	20
Total Points	100

*Scoring for cost will be calculated by using the total 5 year cost (total implementation and 5 years of annual support) provided in Attachment C.

Assume the following cost proposals (**examples only**)

- A. \$50,000.00
- B. \$38,000.00
- C. \$49,000.00

Company B with a total price of \$38,000.00 is the low offer. Take the low offer and divide each of the other offers into the low offer to calculate a percentage. This percentage is then multiplied by the number of points available for the cost. In this case, 10 points are allocated to cost.

- | | | |
|---|---------|------------|
| A. \$38,000.00 divided by \$50,000.00 =.76 | .76*10 | 7.6 points |
| B. \$38,000.00 divided by \$38,000.00 =1.00 | 1.00*10 | 10 points |
| C. \$38,000.00 divided by \$49,000.00=.77 | .77*10 | 7.7 points |

Any final negotiations for services, terms and conditions will be based, in part, on the firm's method of providing the service and the fee schedule achieved through discussions and agreement with the county's review committee. The county is under no obligation to accept the lowest priced proposal and reserves the right to further negotiate services and costs that are proposed. The county also reserves the sole right to recommend for award the proposal and plan that it deems to be in its best interest.

The county reserves the right to reject all proposals. All proposals, including supporting documentation shall become the property of Sedgwick County. All costs incurred in the preparation of this proposal shall be the responsibility of the firm making the proposals. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service which best meets its required needs, quality levels and budget constraints.

County reserves the right to reject any proposal, determine any irregularities, and make final determination for award.

No negotiations, decisions, or actions will be initiated by any firm as a result of any verbal discussion with any County employee during the request for proposal process. Sedgwick County reserves the right to select the service(s) and/or provider(s), and subsequently recommend for award, the proposed services that best meets required needs, quality levels, and budget constraints.

D. [Request for Proposal Timeline](#)

The following dates are provided for information purposes and are subject to change without notice. Contact the Purchasing Section at (316) 660-7255 to confirm any and all dates.

Distribution of Request for Proposal to interested parties	April 6, 2018
Pre-Proposal Meeting	April 9, 2018 @ 10:00AM
Questions and clarifications submitted in writing by 5:00 p.m. CDT	April 13, 2018
Addendum Issued	April 16, 2018
Sealed Proposal due before 1:45pm CDT	April 24, 2018 @ 1:45PM
Evaluation Period	April 25-May 2, 2018
Board of Bids and Contracts Recommendation	May 9, 2016
Board of County Commission Award	May 16, 2016

E. [Contract Period and Payment Terms](#)

A contractual period will begin following Board of County Commissioners (BoCC) approval of the successful firm(s) and continue for a period of one (1) year with four (4) one (1) year options to renew.

Either party may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions

http://www.sedgwickcounty.org/purchasing/payment_and_invoice_provisions.pdf

F. [Insurance Requirements](#)

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. Contractor shall furnish a certificate evidencing such coverage, with County listed as an additional insured, except for professional liability, workers' compensation and employer's liability. **Certificate shall be provided prior to award of contract.** Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after County receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas **(must be acknowledged on the bid/proposal response form).**

NOTE: If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of Contractor to require that any and all approved subcontractors meet the minimum insurance requirements. Contractor shall obtain the above referenced certificate(s) of insurance, and in accordance with this Agreement, provide copies of such certificates to County.

Workers' Compensation:

Applicable coverage per State Statutes

Employer's Liability Insurance: \$100,000.00

Commercial General Liability Insurance:

Each Occurrence \$500,000.00

Aggregate \$500,000.00

Personal Injury:

Each Occurrence \$500,000.00

General Aggregate \$500,000.00

Automobile Liability:

Combined single limit \$500,000.00

Professional Liability

If required

Special Risks or Circumstances:

Entity reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

G. Indemnification

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider's performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney's fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

H. Confidential Matters and Data Ownership

The successful proposer agrees all data, records and information, which the proposer, its agents and employees, which is the subject of this proposal, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful proposer agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data. Successful proposer agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Proposal is the property of Sedgwick County.

I. Proposal Conditions

<https://www.sedgwickcounty.org/media/31338/proposal-terms-conditions.pdf>

General Contract Provisions

<https://www.sedgwickcounty.org/media/31337/general-contractual-provisions.pdf>

Mandatory Contract Provisions

<https://www.sedgwickcounty.org/media/31336/mandatory-contractual-provisions.pdf>

Sample Contract

<https://www.sedgwickcounty.org/media/39236/sample-contract.pdf>

VIII. Required Response Content

Proposal(s) should be organized in the following format and information sequence:

Checklist

Use this checklist to ensure that all of the required documentation is in place before submitting a proposal.

Document/ Narrative Section	Yes	No
1. Most Recent Financial Audit (with original copy only)	<input type="checkbox"/>	<input type="checkbox"/>
2. Identification Information	<input type="checkbox"/>	<input type="checkbox"/>
3. Scope of Work	<input type="checkbox"/>	<input type="checkbox"/>
4. Attachment A- Treatment License	<input type="checkbox"/>	<input type="checkbox"/>
5. Attachment B- Outcome Measures	<input type="checkbox"/>	<input type="checkbox"/>
6. Attachment C- Rate Description	<input type="checkbox"/>	<input type="checkbox"/>
7. Attachment D- Certificate of Tax Clearance	<input type="checkbox"/>	<input type="checkbox"/>

Applicants may attach additional material after Attachment D that would help reviewers in understanding and assessing their proposal. (i.e. Letters of support, program brochures etc.)

IX. Response Form

REQUEST FOR PROPOSAL

#18-0033

SUBSTANCE ABUSE TREATMENT PROGRAM

The undersigned, on behalf of the proposer, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a proposal 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 proposer is entered; (4) they have read the complete Request for Proposal and understands all provisions; (5) if accepted by the county, this proposal is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted proposal will be their responsibility.

NAME _____

DBA/SAME _____

CONTACT _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PHONE _____ FAX _____ HOURS _____

STATE OF INCORPORATION or ORGANIZATION _____

WEBSITE ADDRESS _____ EMAIL _____

NUMBER OF LOCATIONS _____ NUMBER OF PERSONS EMPLOYED _____

TYPE OF ORGANIZATION: Public Corporation _____ Private Corporation _____ Sole Proprietorship _____

Partnership _____ Other (Describe): _____

BUSINESS MODEL: Small Business _____ Manufacturer _____ Distributor _____ Retail _____

Dealer _____ Other (Describe): _____

Not a Minority-Owned Business: _____ Minority-Owned Business: _____ (Specify Below)

_____ African American (05) _____ Asian Pacific (10) _____ Subcontinent Asian (15) _____ Hispanic (20)

_____ Native American (25) _____ Other (30) - Please specify _____

Not a Woman-Owned Business: _____ Woman-Owned Business: _____ (Specify Below)

_____ Not Minority - Woman Owned (50) _____ African American-Woman Owned (55)

_____ Asian Pacific-Woman Owned (60) _____ Subcontinent Asian-Woman Owned (65) _____ Hispanic Woman Owned (70)

_____ Native American-Woman Owned (75) _____ Other – Woman Owned (80) – Please specify _____

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: _____ Yes _____ No

INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII: _____ Yes _____ No

ACKNOWLEDGE RECEIPT OF ADDENDA: All addendum(s) are posted to our RFQ/RFP web page and it is the vendor's responsibility to check and confirm all addendum(s) related to this document by going to www.sedgwickcounty.org/finance/purchasing.asp.

NO. _____, DATED _____; NO. _____, DATED _____; NO. _____, DATED _____

In submitting a proposal, vendor acknowledges all requirements, terms, conditions, and sections of this document. Proposal submission format should be by order in which sections are listed throughout the document. All minimum and general requirements should be specifically addressed and detailed in proposer's response. **Exceptions to any part of this document should be clearly delineated and detailed.**

Signature _____ Title _____

Print Name _____ Dated _____