

| Quantity | Description | Frame Type | Unit Price | Extended Price |
|----------|--------------------|------------|------------|----------------|
| 22 | Mobile Stool Table | Chrome | \$ _____ | \$ _____ |
| | Brand: | Painted | \$ _____ | \$ _____ |
| | Model# | | | |
| | Good thru: | | | |
| | *Required | | | |

By initialing below, the Proposer certifies that their product meets the required specifications from the bid documents. SCS shall declare a proposal as ~~resp~~ responsive for failure to meet the "Required" specifications.

_____ REQUIRED Square shape stool support posts.

_____ REQUIRED One piece stool

_____ REQUIRED Large non-marring reinforced glides with metal washers to prevent legs from breaking thru and damaging floors

By checking this box, Proposer agrees that SCS reserves the right to extend the terms, conditions, and prices of this contract to other Institutions (such as State, Local and/or Public Agencies) who express an interest in participating in any contract resulting from this ITB. Each of the piggyback Institutions will issue their own purchasing documents for the goods/services. Proposer agrees that SCS shall bear no responsibility or liability for any agreements between Proposer and the other Institution, if they desire to exercise this option.

Authorized Signature: _____ Title _____

Printed Name: _____ Email _____

Vendor Legal Name: _____

Date: _____

NOTICE TO PROPOSERS

There may be one or more amendments to this ITB. In order to receive communication for any such amendments issued specifically to this ITB, the proposer must provide the information requested below to the Sumner County Board of Education (SCS) Purchasing Department. The information may be sent to Chris Harrison, Purchasing Supervisor, chris.harrison@sumnerschools.org. SCS will send amendments only to those proposers which complete and return this information in a timely manner.

ITB Number: 20180131BOE Mobile Stool Table

Company Name: _____

Mailing Address: _____

Phone Number: _____

Contact Person: _____

Email Address: _____

Emailed amendments will be sent in a Microsoft Word (Office for Windows) or Portable Document Format (pdf) format. Any alterations to the document made by the proposer may be grounds for rejection of proposal, cancellation of an subsequent award or any other legal remedies available to SCS.

Amendments will also be posted on the SCS website <https://sumnerschools.org/index.php/currentbids-and-rfps> and attached to the solicitation listing as a PDF or WORD file. Check the particular solicitation on the Current Bids and RFPs webpage for any posted amendments.

By completing and returning this form, the Proposer has expressed its intent to provide a proposal for 20180131BOE Mobile Stool Table

V. Protests

In the event that any interested party finds any part of the listed specifications, terms or conditions to be discrepant, incomplete or otherwise questionable in any respect; it shall be the responsibility of the concerned party to notify the SCS Purchasing Office of such matters immediately upon receipt of the RFP. All notifications must be sent to the Purchasing Supervisor via email at purchasing@sumnerschools.org

Any actual or prospective Proposer who is aggrieved in connection with the award of a contract may protest to the Purchasing Supervisor and/or the Sumner County Board of Education at its regularly scheduled meeting.

VI. New Vendors

- To comply with Internal Revenue Service requirements, all vendors who perform any type of service are required to have a current IRS Form 990 on file with the SCS Finance Department. It is a mandatory requirement to complete the IRS Form 990 (Attachment 1) included in this RFP.
- To comply with the Tennessee Labor Employment Act (50-702 and 50-703), nonemployees (individuals paid directly by the employer in exchange for the individual's labor or services) must have on file one (1) of the following documents:
 - A valid Tennessee Driver's License or photo ID (50-13.6 e(T)1)-4(T)1ot282 1(l).013 TwU(o)-9.6 (n3)-3

ATTACHMENT 2

ATTESTATION RE PERSONNEL USED IN CONTRACT PERFORMANCE

| | |
|--|--|
| CONTRACTOR LEGAL ENTITY NAME: | |
| FEDERAL EMPLOYER IDENTIFICATION NUMBER: (or Social Security Number) | |

The Contractor, identified above, does hereby attest, certify, warrant, and assure that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract.

SIGNATURE & DATE:

NOTICE: This attestation MUST be signed by an individual empowered to actually bind the Contractor.

2. OPEN RECORDS. In order to comply with the provisions of the Tennessee Open Records Act, all bids will be publicly opened

