**Exhibit C**

moonoververmont

**State of Vermont Bidder Response Form**

**Request for Proposal Name:** *Integrated Eligibility and Enrollment Noticing Solution*

**Vendor Instructions:**

Provide the information requested in this form and submit it to the State of Vermont as part of your Request for Proposal (RFP) response. All answers must be provided within the form unless otherwise specified.

**Important: This form must be completed and submitted in response to this RFP for your proposal to be considered valid. The submission must also include the eight (8) additional artifacts requested within this form (denoted by underlined green font).**

## See the RFP for full instructions for submitting a bid. **Bids must be received by the due date and at the location specified on the cover page of the RFP.**

Direct any questions you have concerning this form or the RFP to:

**Kristine Furman,** Technology Procurement Administrator

State of Vermont

Office of Purchasing & Contracting

133 State Street, 5th Floor

Montpelier VT 05633-8000

E-mail Address: [**SOV.ThePathForward@vermont.gov**](mailto:SOV.ThePathForward@vermont.gov)

## **Part 1: VENDOR PROFILE**

1. Complete the table below.

|  |  |
| --- | --- |
| **Item** | **Detail** |
| Company Name: | [insert the name that you do business under] |
| Physical Address: | [if more than one office – put the address of your head office] |
| Postal Address: | [e.g. P.O Box address] |
| Business Website: | [url address] |
| Type of Entity (Legal Status): | [sole trader/partnership/limited liability company or specify other] |
| Primary Contact: | [name of the person responsible for communicating with the Buyer] |
| Title: | [job title or position] |
| Email Address: | [email] |
| Phone Number: | [landline] |
| Fax Number: | [fax] |

1. Provide a brief overview of your company including number of years in business, number of employees, nature of business, and description of clients. Identify any parent corporation and/or subsidiaries.
2. Is your organization currently or has it previously provided solutions and/or services to any agency or entity of the Vermont State government? If so, name the State entity, the solution and/or services provided, and the dates.
3. **Provide a Financial Statement\* for your company and** **label it Attachment #1**. A confidentiality statement may be included if this financial information is considered non-public information. This requirement can be filled by:
   * A current Dun and Bradstreet Report that includes a financial analysis of the firm.
   * An Annual Report if it contains (at a minimum) a Compiled Income Statement and Balance Sheet verified by a Certified Public Accounting firm; or
   * Tax returns and financial statements including income statements and balance sheets for the most recent 3 years, and any available credit reports.
4. Disclose any judgments, pending or expected litigation, or other real potential financial reversals, which might materially affect the viability or stability of your company or indicate below that no such condition is known to exist.

1. Provide a list of three references similar in size and industry (preferably another governmental entity). References shall be clients who have implemented your Solution within the past 48 months.

|  |  |
| --- | --- |
| **Reference 1** | **Detail** |
| Reference Company Name: | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |

|  |  |
| --- | --- |
| **Reference 2** | **Detail** |
| Reference Company Name: | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |

|  |  |
| --- | --- |
| **Reference 3** | **Detail** |
| Reference Company Name: | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |

## **Part 2: Implementation of Bidder Proposed Solution**

Please respond with how your proposed solution will meet the specifics of the question as the topic relates to the Design, Development, and Implementation (DDI). If any question(s) are not relevant to your proposed solution indicate this with a brief description explaining why the question is not applicable.

1. Provide a description of the solution’s hosting environment, including the hosting type and locations of the production and DR sites, certification(s) of the environment(s), and network details.
2. Provide a description and architectural specification(s) for all infrastructure of the proposed solution.
3. Provide a description of the infrastructure capabilities for the proposed solution.
4. Provide a high-level description of the proposed solution’s standard features and functions. Indicate in your response which technology the features and functions apply to.
5. Confirm that your proposed solution will include the following required core Noticing components. With consideration that all components are required, describe any caveats or clarifications in the box labeled “Response Rationale”:

|  |  |  |  |
| --- | --- | --- | --- |
| Core Component | RFP Section | Compliance | Response Rationale |
| **CCMS** |  |  |  |
| **State of Vermont Integration Gateway** |  |  |  |

1. Provide a brief description of the evolution of the system/software solution you are proposing. Include the date of the first installed site and major developments which have occurred (e.g. new versions, new modules, specific features).
2. List the total number of installations in the last 4 years, by the year of installation.
3. Have you implemented the proposed solution for other government entities? If so, tell us who, when, and how that implementation went?
4. **Provide a Road Map that outlines the company’s short-term (less than 3 years) and long-term (3+ years) goals for the proposed solution/software and label it Attachment #2.**
5. **Provide a PowerPoint (minimum of 1 slide and maximum of 10 slides) that provides an Executive level summary of your proposal to the State. Label it Attachment #3.**
6. Does your proposed solution include any warranties? If so, describe them and provide the warranty periods.
7. Describe any infrastructure, equipment, network, hardware, or third-party tools *required* to implement and/or run the solution.
8. What is your recommended way to host the application solution?
9. It is the State’s expectation that this project will be ready for the FNS Pilot Implementation within 9 months after signing the contract. Provide a timeline to include key milestones, high-level tasks, and dates to enable the State to gain an understanding of the proposed work streams along with your recommendation(s) for the DDI timeline.

## **Part 3: Functional Requirements**

A complete list of Functional Requirements, in User Story format, can be found in tab “3.1 User Stories” of the Vermont–Noticing–Bidders Response Form Criteria document. Bidders are required to respond to each of the Requirements. The first tab of the document, labeled “Introduction” provides a summary of the Excel Workbook, its contents, and directions for response. Tab 3.1 contains the actual Requirements and the columns to be entered by the Bidder. The tabs are identified as:

1.0 Introduction

3.1 User Stories

## **Part 4: Non- Functional Requirements**

A complete list of Non-Functional Requirements (NFRs) and other items requiring your response can be found in tabs 4.1 – 4.7 of the Vermont–Noticing–Bidders Response Form Criteria document. Bidders are required to respond to the listed items in these tabs. The first tab of the document, labeled “Introduction” provides a summary of the Excel Workbook, its contents, and directions for response. The tabs are identified as:

1.0 Introduction

4.1 Application Solution

4.2 CMS

4.3 FNS

4.4 Testing

4.5 Data Compliance

4.6 Cybersecurity

4.7 Security DR BC

## **Part 5: Project Management Approach**

1. Describe the approach you would recommend for project managing this engagement.
2. Provide a list of the standard project management deliverables and your approach that would normally be produced for this type of engagement.
3. **Provide a proposed list of project phases, major milestones, and an implementation timeline. Label this Attachment #4.**
4. Describe typical risks that you have encountered with an implementation of the proposed solution, along with successfully implemented mitigation plans.
5. Describe the experience and qualifications of the Project Manager you would offer as the resource for this engagement. **Provide a copy of their resume and label it Attachment #5.**

**Part 6: Technical Services**

1. Describe the technical services included in your proposal (e.g., business analysis, configuration, migration, batch and API development, testing, implementation, etc.).
2. Provide a list of the standard deliverables for the technical services described above. See RFP section 2.9.3 for a listing of the State’s minimum acceptable list of deliverables.
3. Provide a description of the roles/services/tasks the State will be expected to cover as part of this engagement. Describe any additional roles/services/tasks that are optional but would be beneficial for the State to provide.
4. Describe the experience and qualifications of the mandated technical resources (Architects, Account Executives) proposed for this engagement. **Provide their resume(s) and label them Attachment #6.**
5. Describe the training that is included in your proposal.
6. Describe the system, administrator, and/or user documentation that is included in your proposal.
7. **Part 7: Maintenance AND Operation (M&O) and Support Services**
8. Provide answers to the questions below regarding your company’s M&O and Support Services. Include all components of the proposed solution and separate by component if this clarifies the M&O and Support Services supplied:

|  |  |
| --- | --- |
| **Questions** | **Vendor Response** |
| **System Performance** | |
| What are the hours of system availability? |  |
| What is the system response time? |  |
| What is the maximum number of concurrent users? |  |
| Describe other relevant performance level information? |  |
| **Service:  Customer Phone &/or Email Support** | |
| What is the method for contacting technical support? |  |
| What are the hours of operation for support? |  |
| What is the turnaround time for responses? |  |
| What is the escalation process for support issues? |  |
| Describe your approach to staffing during maintenance and operations of the solution. **Provide a high-level organizational chart of the proposed roles and responsibilities for operations. Label this as Attachment #7.** |  |
| Define your response resolution metrics and how you capture and report them. |  |
| **Service:  Incident/Security Breach Notification and Process** | |
| Describe your identification and notification process for security breaches. |  |

|  |  |
| --- | --- |
| **Questions** | **Vendor Response** |
| **Service:  Data Management** | |
| Describe how data is stored, retained, backed-up (including frequency), and purged. |  |
| **Service:  Hosting** | |
| Describe the proposed Cloud hosting service (examples - Microsoft Azure, Amazon Web Services (AWS), Google Cloud Platform (GCP)) for your solution. |  |
| **Service:  Scheduled Maintenance/Downtime** | |
| What is the frequency of scheduled maintenance and downtime? |  |
| What is the notification process for scheduled maintenance and downtime? |  |
| Describe all scenarios that would require the State’s approval of scheduled downtime due to maintenance or other updates. |  |
| Describe how “maintenance” updates are tested with customers prior to production installation. |  |
| **Service:  System Upgrades** | |
| Are software upgrades provided as part of the software support contract? |  |
| Describe your software upgrade process. |  |
| How often are new versions released? |  |
| What documentation and training is provided for system upgrades? |  |
| Are there additional costs for upgrades and/or new releases? |  |
| **Questions** | **Vendor Response** |
| Describe how and when the State will have an opportunity to test system upgrades/releases prior to production installation. |  |
| Describe how the State will validate post installation and how changes will be backed out in the event that a problem is encountered. |  |
| **Service:  Defect Resolution and Minor Enhancements** | |
| Describe the frequency and process for providing, testing, and installing bug fixes and minor enhancements. |  |
| **Service:  Disaster Recovery** | |
| Describe the disaster recovery services included in this proposal for any non-state hosted services. |  |
| Describe your experience with RPO and RTO thresholds for your solution in high availability environments. |  |
| Describe the plan your company has in place for its own disaster recovery of any sites that may be involved in support of this proposal. |  |

1. The State’s minimum Service Level Agreements (SLAs) for the Solution are documented in the table below. Confirm if you will be able to meet the SLAs, and if not, provide a detailed explanation.

|  |  |  |
| --- | --- | --- |
| **Service Area** | **Minimum SLA** | **Bidder Response** |
| System Availability | The acceptable amount of availability per month is 99.99% for the production environments.   * The State further expects the Bidder to indicate in their proposed solution the cost variance between availability levels of 99.99% and 99.999%.   The acceptable availability per month for non-production environments are 99.90% during business hours and 99.00% outside business hours. |  |
| System Responsiveness | The acceptable response time for user requests is 2 seconds, determined by calculating the time between when the request traverses into the CCMS solution and when the request traverses out. |  |
| Recovery Time Objective (RTO) and Recover Point Objective (RPO) | Production environments\*:   * RTO = 4 hours   All non-production environments\*:   * RTO = 8 hours     Production environments\*:   * RPO = 6 hours   All non-production environments\*:   * RPO = 12 hours     \* If your proposed solution has concerns with meeting these metrics, please identify those concerns and any resulting cost variances, as well as any recommendations for State consideration. |  |
| Plan of Action and Milestones (POA&M) Remediation Service Level Agreement | Contractor will provide a MARS-E aligned POA&M to the State monthly which will document the state of current open remediation tasks and historic closed remediations for a period of up to 15 months. Remediate the severity of risk as follows unless as otherwise agreed to by both parties:   * Critical ranked risks – shall not exceed more than 15 days in Remediation Status. * High ranked risks – shall not exceed more than 30 days in Remediation Status. * Moderate ranked risks – shall not exceed more than 90 days in Remediation Status. * Low ranked risk – shall not exceed more than 365 days in Remediation Status. |  |
| Incident Notification and Restoration | Severity Level 1\* Incidents:   * Restoration Start Time: Within 30 minutes * Restoration Time: Within 4 hours * Initial Notification: Within 30 minutes of identification * Status Update Notifications: Every 1 hours * Post 24-hour Status Update Notifications: Daily at the end of each business day   Severity Level 2\*\* Incidents:   * Restoration Start Time: Within 60 minutes * Restoration Time: Within 24 hours * Initial Notification: Within 60 minutes of identification * Status Update Notifications: Every 1 hours * Post 24-hour Status Update Notifications: Daily at the end of each business day |  |
| Root Cause Analysis/Debrief | * Contractor shall follow the CMS Guidance for Performing Root Cause Analysis with Performance Improvement Projects documentation which can be found at: <https://www.cms.gov/medicare/provider-enrollment-and-certification/qapi/downloads/guidanceforrca.pdf> . * Root Cause Debrief document must be uploaded to “knowledge repository” within five business days of incident closure. * Root Cause Analysis status must be uploaded to the “knowledge repository” within twenty (20) business days of incident closure. |  |
| \* “Severity Level 1” means production system down or a complete loss of service, the customer’s business operations are halted, or a critical system failure that impacts the entire user community and no workaround is possible. Ex. Inability for all users to login to a production environment, confirmed security breach, or day 0 virus/worm that results in a complete loss of service, critical services are mostly unavailable or not accessible to the majority of State operations, affecting a majority group or groups of people performing a critical business function.   \*\*“Severity Level 2” means service is degraded, resulting in a loss of major functions for a substantial portion of the customer’s user community. The customer’s business operations are severely limited though the customer may do some work. A workaround may be possible but is determined not feasible. Ex. Inability to access a production or non-production environment, Incidents having labor intensive workarounds and inefficient for the State, affects one or more groups of people performing a critical business function. | | |

1. Describe your standard Service Level Agreements (SLAs) for all included components and services of your proposed solution below**. Include a copy of your standard and/or proposed SLAs with your response to this RFP. Label the SLA Attachment #8.**
2. Describe how adherence to your service levels is measured and what remedies you would provide the State when performance doesn’t meet the standard?

## **Part 8: Pricing**

1. Describe the pricing structure for your proposed solution during DDI.
2. Describe all licensing/pricing structure(s) for your proposed solution during M&O.
3. Submit pricing for your proposed solution in the table below. **Insert lines for additional costs, but do not delete or rename any lines in the Table**. **Provide a Fixed Price quote for installation of the software and provide Time + Materials pricing for professional services to be provided, if needed, on an ad-hoc basis post implementation.**

**Customer Communication Management System Implementation**

|  |  |
| --- | --- |
| **CCMS Fixed Price Implementation** | |
| **Phase** | **One Time (Implementation)** |
| Planning | $0.00 |
| Analysis & Design | $0.00 |
| Development Costs other than listed below | $0.00 |
| Stand up, Configuration, Development and Implementation of all Infrastructure for all Environments | $0.00 |
| Data Exchange (Batch and API) | $0.00 |
| Notice Template Creation Easy (26 Templates) | $0.00 |
| Notice Template Creation Medium (51 Templates) | $0.00 |
| Notice Template Creation Difficult (52 Templates) | $0.00 |
| Testing | $0.00 |
| Pilot Deployment (for requested or mandated programs) | $0.00 |
| Production Deployment (includes enhanced support for 3 months, or as needed, following the Production deployment) | $0.00 |
| Annual Costs (to include Maintenance and Operation) Year 1 | $0.00 |
| Annual Costs (to include Maintenance and Operation) Year 2 | $0.00 |
| Annual Costs (to include Maintenance and Operation) Year 3 | $0.00 |
| Annual Costs (to include Maintenance and Operation) Year 4 | $0.00 |
| Annual Costs (to include Maintenance and Operation) Year 5 | $0.00 |
| Optional Additional Annual Costs Year 1 (to include Maintenance and Operation Year 6) | $0.00 |
| Optional Additional Annual Costs Year 2 (to include Maintenance and Operation Year 7) | $0.00 |
| **Total – CCMS Cost for the Contract duration** | $0.00 |

1. Describe any assumptions you have made in relation to the above cost and pricing information.
2. Provide pricing information for any volume discounts available as they relate to discounts the State would be qualify for based on the costing methodology used in Part 2: Bidder Proposal/Solution, question 3-B and the entries in Part 8: Pricing Table above used to derive the Annual Costs for each year. These volume discounts could be associated to the number of software licenses purchased, transactions processed, support years, or other factors used to determine the Annual Costs.
3. Provide pricing for any Functional Requirements marked as “C” (feature is not available in the core solution but can be provided with extending the functionality of the core product or a customization).

**Part 9: Terms and Conditions**

In deciding which Bidder/s to shortlist the State will take into consideration each Bidder’s total response as well as their willingness to meet the State’s terms and conditions. Indicate any objections or concerns to our stated terms and conditions in the RFP or any of the exhibits, addendums or attachments including **Attachment C** of the **IEE Noticing Sample Contract**. Add lines to the table below as needed.

**Important:** Bidder will be bound to all terms and conditions stated in the State’s RFP, exhibits, attachments, and/or addendums except as identified in the RFP Section “2.9.1 Bidders Library Documents” as identified by the “Future Phase Vermont Health Connect Noticing Overview Summary Document” line and then only to the extent specifically set forth in the table below, and only if and to the extent expressly agreed and incorporated in writing in a resulting contract. Note that exceptions to contract terms may cause rejection of the proposal.

|  |  |  |
| --- | --- | --- |
| **Clause Location** | **Concern** | **Proposed Verbiage** |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |

**Part 10: CERTIFICATE OF COMPLIANCE/Authorized Company Signature**

**For a bid to be considered valid, this Part 10 must be completed in its entirety, executed by a duly authorized representative of the bidder, and submitted as part of the response to the proposal.**

1. **NON-COLLUSION:** Bidder hereby certifies that the prices quoted have been arrived at without collusion and that no prior information concerning these prices has been received from or given to a competitive company. If there is sufficient evidence to warrant investigation of the bid/contract process by the Office of the Attorney General, bidder understands that this paragraph might be used as a basis for litigation.
2. **CONTRACT TERMS:** Bidder hereby acknowledges that is has read, understands and agrees to the terms of this RFP, including Attachment C: Standard State Contract Provisions, and any other contract attachments included with this RFP.
3. **Worker Classification Compliance Requirement:** In accordance with Section 32 of The Vermont Recovery and Reinvestment Act of 2009 (Act No. 54), the following provisions and requirements apply to Bidder when the amount of its bid exceeds $250,000.00.

**Self-Reporting.** Bidder hereby self-reports the following information relating to past violations, convictions, suspensions, and any other information related to past performance relative to coding and classification of workers, that occurred in the previous 12 months.

|  |  |  |
| --- | --- | --- |
| **Summary of Detailed Information** | **Date of Notification** | **Outcome** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Subcontractor Reporting.** Bidder hereby acknowledges and agrees that if it is a successful bidder, prior to execution of any contract resulting from this RFP, Bidder will provide to the State a list of all proposed subcontractors and subcontractors’ subcontractors, together with the identity of those subcontractors’ workers compensation insurance providers, and additional required or requested information, as applicable, in accordance with Section 32 of The Vermont Recovery and Reinvestment Act of 2009 (Act No. 54), and Bidder will provide any update of such list to the State as additional subcontractors are hired. Bidder further acknowledges and agrees that the failure to submit subcontractor reporting in accordance with Section 32 of The Vermont Recovery and Reinvestment Act of 2009 (Act No. 54) will constitute non-compliance and may result in cancellation of contract and/or restriction from bidding on future state contracts.

1. **Executive Order 05 – 16: Climate Change Considerations in State Procurements Certification**

**Bidder certifies the following (Bidder may attach any desired explanation or substantiation. Please also note that Bidder may be asked to provide documentation for any applicable claims):**

* 1. Bidder owns, leases or utilizes, for business purposes, space that has received:
* Energy Star® Certification
* LEED®, Green Globes®, or Living Buildings Challenge℠ Certification
* Other internationally recognized building certification:

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2. Bidder has received incentives or rebates from an Energy Efficiency Utility or Energy Efficiency Program in the last five years for energy efficient improvements made at bidder’s place of business. Please explain:

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3. Please Check all that apply:

* Bidder can claim on-site renewable power or anaerobic-digester power (“cow-power”). Or bidder consumes renewable electricity through voluntary purchase or offset, provided no such claimed power can be double-claimed by another party.
* Bidder uses renewable biomass or bio-fuel for the purposes of thermal (heat) energy at its place of business.
* Bidder’s heating system has modern, high-efficiency units (boilers, furnaces, stoves, etc.), having reduced emissions of particulate matter and other air pollutants.
* Bidder tracks its energy consumption and harmful greenhouse gas emissions. What tool is used to do this? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Bidder promotes the use of plug-in electric vehicles by providing electric vehicle charging, electric fleet vehicles, preferred parking, designated parking, purchase or lease incentives, etc..
* Bidder offers employees an option for a fossil fuel divestment retirement account.
* Bidder offers products or services that reduce waste, conserve water, or promote energy efficiency and conservation. Please explain:

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1. Please list any additional practices that promote clean energy and take action to address climate change:

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1. **Executive Order 02 – 22: Solidarity with the Ukrainian People**

* By checking this box, Bidder certifies that none of the goods, products, or materials offered in response to this solicitation are Russian-sourced goods or produced by Russian entities. If Bidder is unable to check the box, it shall indicate in the table below which of the applicable offerings are Russian-sourced goods and/or which are produced by Russian entities. An additional column is provided for any note or comment that you may have.

|  |  |
| --- | --- |
| **Provided**  **Equipment or Product** | **Note or Comment** |
|  |  |
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|  |  |

I am authorized to submit a proposal to the State of Vermont in response to this RFP on behalf of my organization. The information provided as part of my organization’s response is a true and accurate representation of my organization’s ability to meet the State of Vermont’s business needs as expressed in this RFP.

|  |  |
| --- | --- |
| **Signature:** |  |
| **Full name:** |  |
| **Title:** |  |
| **Company:** |  |
| **Date:** |  |