



**Board of Trustees of
EASTERN ILLINOIS UNIVERSITY**
DEPARTMENT OF PROCUREMENT,
DISBURSEMENTS AND CONTRACT SERVICES
600 Lincoln Avenue
Charleston, Illinois 61920-3099

REQUEST FOR QUOTATION

TODAYS DATE: May 13, 2008

Bids Due By: May 28, 2008 at 2:00 PM
Prevailing Time

To: (Insert Company Name and Address Here)

Ship To: ITS – Greg DeYoung
Eastern Illinois University
Central Receiving
University Drive & Hayes Street
Charleston, Illinois 61920

REQUEST NUMBER	PURCHASING CONTACT	PHONE NUMBER	F.O.B. POINT	DEPARTMENT CONTACT
BF004977	Katie Rice	217-581-6018	EIU	ITS – 217-581-3227
DEPT. OF HUMAN RIGHTS #	TAX IDENTIFICATION #	EXPECTED DELIVERY DATE		
_____	_____	_____		

DESCRIPTION

Sun StorageTek™ Sun Blades and Expansion Trays as per the part listing and specifications .

Bids will be awarded based on the following criteria:

1. Bid price
2. Ability to meet schedules
3. Ability to meet specifications
4. Ability to perform work
5. Past performance with Eastern Illinois University
6. References

SEE ATTACHED!

Sealed bids will be accepted until May 28, 2008 at 2:00 PM prevailing time in the Department of Procurement, Disbursements and Contract Services, 1135 Old Main, 600 Lincoln Avenue, Charleston, IL 61920. On the outside of the envelope must appear the Bid Number and the Bid Due Date.

QUOTATION MUST BE HELD FIRM FOR SIXTY (60) DAYS PHONE: _____ FAX: _____ 800 #: _____	Insert Total Bid Price Here	
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Signature Required

Date

BF004977 - Specifications and Parts Listing

Product Number	Description	Quantity	Unit Price	Extended Price
Config ID 6244897	Configuration A90-A			
A90-A	1 Sun Blade 6000 Chassis, 10U, 2 6000W power supply modules, 6 redundant rear fan modules, 1 Chassis Monitoring Module, Rack Mount Rail Kit, Accessory Kit with Dongle and RJ45-DB9 adapter, Filler panels: 9 Server Module, 20 EM, 2 NEM, RoHS-5	2		
A93-AA	Sun Blade X6250 Base Assembly for Factory Integration. No CPU, Memory nor Disk Drives, 4 Drive Filler Panels, RoHS-5	10		
8057A	Solaris 10 U3 x64 and Java Enterprise System 4 pre-loaded for Sun Blade X6250 servers	10		
4620A	Sun Blade RAID Expansion Module adapter, REM form factor, 256MB of cache and battery back-up. For Factory Assembly. RoHS-5	10		
4401A	4GB Memory kit, PC2-5300 DDR2 Fully Buffered DIMM w/ ECC (2x2GB) for Sun Blade X6250 & X8450 x64 servers. For Factory integration. RoHS-5.	80		
4518A	Sun Blade X6250 CPU Option for XATO with one Quad-Core Intel® Xeon® E5410 processor (2x6MB L2, 2.33 GHz, 1333 MHz FSB, 80W) with heat sink. RoHS-5.	20		
RA-SS2CD-73G15K	73GB 15K RPM 2.5" SAS hard disk drive. XATO & Factory Integration. RoHS-5.	20		
X5074A-Z	PWR Cord, Qty 4, AC Input, 20A (AMER: L6-20P to IEC 320, 4m) for the Sun Blade 6000 or the Sun Blade 8000 P Modular System, RoHS-5	2		
IWU-A90-24-3G	Sun Blade 6000 Upgrade to Gold Support + 7X24 On-Site Support for 3 years	2		
X7284A-Z	Sun x4 PCI-Express Quad Gigabit Ethernet UTP ExpressModule, OEM from Intel, RoHS-5	10		
SG-XPCIE2FC-Q84-Z	Sun Storagetek PCIe Enterprise 4Gb FC Host Bus Adapter, (Qlogic), ExpressModule Form Factor, Dual Port, RoHS 6 complaint	10		
X4250A	Sun Blade 6000 GbE 10-port Pass-Thru Network Express Module, RoHS-5	4		
Continued on Next Page				

Config ID 6244935	Configuration XTCCSM2R01A0J4800Z			
XTCCSM2R01A0J4800Z	RoHS-5, Sun StorageTek™ CSM200, Rack-Ready Expansion Tray, 4800GB, 16 * 300GB 15Krpm 4GB FC-AL Drives, 2 * I/O Modules, 2 * redundant AC power supplies and cooling fans, 2 * FC ports for expansion, 4 * shortwave SFPs with *2 LC-LC FC cables (Standard Configuration).	2		
XTC6140R11A2M640-E	RoHS-5 Sun StorageTel™ 6140 array with 4GB cache and 8 host ports, Rack-Ready Controller Tray, 6400 GB, 16 * 400GB 10Krpm 4Gb FC-AL Drives, 2 * 2GB-cache memory FC RAID Controller cards, 2 * redundant AC power supplies and cooling fans, 2 * FC ports for expansion trays and 8 * host ports with shortwave SFPs, 2 * 5M fibre optic cables, 2 * 6M ethernet cables and management software, 3 year On-Site warranty included for Education Only	1		
XTCCSM2R01A0N16TBZ	RoHS-5. Sun StorageTek™ CSM200, Rack-Ready Expansion Tray, 16TB, 16 * 1TB 7.2Krpm SATA-II Drives, 2 * I/O Modules, 2 * redundant AC power Supplies and cooling fans, 2 * FC ports for expansions, 4 * shortwave SFPs with 2* 2M LC-LC FC cables. (Standard Configuration)	1		
XTCCSM2-RK-19UZ	RoHS-5, Sun Modular Storage: StorageTek™ 6140 / CSM200, Rack Rail Kit for standard 19-inch system cabinets and racks including the Sun Rack 900/1000 racks	4		
XTC6140-DOM4-ARY	Sun StorageTek 4 Domainright-to-use (RTU) license key for Sun StorageTek 6140 Array.SW License for 4 Storage Domains on 6140 Array	1		
IWU-ST6140-4-24-3G	Sun StorageTek 6140 4GB Controller Upgrade to Gold Support + 7X24 On-Site Support for 3 years	1		
IWU-STCSM2-24-3G	Sun StorageTek CSM200 Expansion Unit Upgrade to Gold Support + 7X24 On-Site Support for 3 years	3		
X311L	Localized Power Cord Kit North American/Asian. This product is Hazard Class Y, RoHS compliant	8		
EIS-ARRAY-TRAY-E	Installation charge for storage trays into any of the SE6XX0/3XX0 base units during local business hours	3		
EIS-6140CSMARR-E	Installation of Sun StorageTek 6140/CSM Base charge eduring local business hours.	1		
6140-DOM4-ARY-3PM	Sun StorageTek 6140 4 Domain RTU Software Support, 3 year Premium Support.	1		
Total	Both pages			

Please Note - All items need to be received and invoiced prior to July 20, 2008. Any installation must also be completed prior to that date.

Will delivery and installation be complete prior to July 20, 2008?

Yes _____ No _____

Anticipated Delivery Date: _____

Signature

Title

Company

Date

Before Submitting Your Sealed Bid, have you:

- _____ Signed your Bid Form?
- _____ Read and signed the Instructions to Bidders?
- _____ Completed the Certification's Page?
- _____ Completed the Vendor Disclosure of Financial Interest's Form?
- _____ Completed the Drug Free Certifications Form?
- _____ Completed the Insurance Requirement Form?
- _____ Supplied Your Department of Human Rights Number (DHRN)?
- _____ Inserted your Company Name, Bid Number and Due Date on the outside of your envelope?

EASTERN ILLINOIS UNIVERSITY, Charleston, Illinois

INSTRUCTIONS TO BIDDERS

SIGNATURES: Quotation must be made on enclosed form. Sign and return original; make a copy for your files. Unsigned bids will not be considered. Signatures of bidders on these forms shall be construed as acceptance of all items on proposal and specifications.

ALTERNATES: Manufacturer's trade names are used in specifications for express purpose of establishing standard of quality and coordination of design, not for purpose of limiting competition. Unless manufacturer's name and catalog number are inserted opposite individual items, it is understood bidder is bidding exact item specified. If bidding other than specified, descriptive literature must accompany bid.

SAMPLES: Samples may be required. Each sample should be clearly labeled with vendor's name, address and brief description of item. All transportation charges on samples must be paid by vendor. Failure to comply with a request to submit samples may be cause for rejection of bid. No payment will be made for samples. However, samples not destroyed by examination or testing will be returned to bidders if such request is made by bidder. Samples will be returned at bidder's expense.

TAX EXEMPT: Eastern Illinois University is not subject to Federal Excise Tax or Illinois Retailers Occupational Tax.

DELIVERY REQUIREMENTS: Prices quoted shall include all charges for packing, transportation and delivery to Eastern Illinois University, Charleston, Illinois.

FIRM QUOTATIONS: Prices quoted shall be firm for a period of sixty (60) days after the date established for opening of the bids.

EXECUTION OF BIDS: In order to provide for increases or decreases in quantity specified because of changes in requirements or conditions, bidders are encouraged to indicate, in spaces provided, both unit and total amounts. In the event bidder does not supply unit costs, it will be assumed the unit cost is the total cost divided by quantity specified. Failure to indicate unit costs will not result in a technical disqualification.

BID INSPECTIONS: Bids will be available for inspection in the Office of Director of Department of Procurement, Disbursements and Contract Services after an award is made.

AVAILABILITY OF DOCUMENTS: All State Universities in Illinois publish their competitive Bid/RFP and other procurement notices, as well as award information at: <http://procure.stateuniv.state.il.us>

Suppliers intending to respond to any posted requirement are encouraged to visit that site to ensure that they have received a complete and current set of documents. Some notices may provide a download copy of the pertinent procurement documents, as well as any amendments to those documents. Additionally, some notices may permit a supplier to submit a response to a posted requirement in an electronic format. Any supplier receiving a copy of procurement documents from a bid referral service and/or other third party is solely responsible for ensuring that they have received all necessary procurement documentation including amendments. Interested suppliers should note that the State Universities in Illinois do not charge (unless otherwise stated in the Bid/RFP documents) any fees to obtain a copy of or respond to documents posted for competitive solicitation. The issuing University is not responsible for ensuring that all or any procurement documentation is received by a supplier that is not appropriately registered with the issuing University.

HANDLING OF BIDS: Correspondence must be addressed to Director, Department of Procurement, Disbursements and Contract Services. All bids must be submitted in a sealed envelope addressed to: Department of Procurement, Disbursements and Contract Services, 1135 Old Main, Eastern Illinois University, Charleston, Illinois, 61920. On the outside of the envelope in the lower left-hand corner must appear: Sealed Bid, bid number, vendor name, and bid opening time. All formal sealed bids received after specified time and date will be marked "**Received too late for consideration**" and will be returned to bidder unopened. Telephone, telegraph or faxed quotes for sealed bids will not be considered. Bidders may change or withdraw their sealed bid in writing prior to bid closing time.

ADDENDA AND INTERPRETATIONS: No interpretation of the meaning of plans, specifications or other pre-bid documents will be made to any vendor orally. The Board of Trustees of Eastern Illinois University will not be responsible for any interpretations of the documents which any presumes to make on its behalf, other than written addenda signed by

the University Department of Procurement, Disbursements and Contract Services. All correspondence must be addressed to the Director, Department of Procurement, Disbursements and Contract Services.

The special attention of Vendors is directed to the fact that no claim for relief because of errors or omissions in the bidding will be considered. Vendors will be held strictly to the proposals submitted. Should a vendor find any discrepancies in, or omissions, from any of the documents or to be in doubt as to the meanings, they shall advise the Director, Department of Procurement, Disbursements and Contract Services who will issue the necessary clarifications to all prospective vendors by means of addenda.

RESERVATION OF RIGHTS OF UNIVERSITY: Board of Trustees of Eastern Illinois University reserves the right to reject any or all bids, to waive irregularities, and to accept the bid which is considered to be in the best interest of the University. The University reserves the right to split award if it is in the best interest of University. If a split award is not acceptable to the bidder, it must be stated so in the bid.

COMPLIANCE WITH LEGISLATION: Bidders signatures shall be construed as acceptance of a willingness to comply with all provisions of the acts of the General Assembly of the State of Illinois relating to the Illinois Human Rights Act, Equal Employment Clause, Prevailing Wage Act for workers in our area, preference to citizens of United States and residents of State of Illinois. Provisions of said acts are hereby incorporated by reference and become a part of specifications.

RECYCLED MATERIALS: When a public contract is to be awarded to the lowest responsible bidder, an otherwise qualified bidder who will fulfill the contract through the use of products made of recycled materials may, on a pilot basis or in accordance with a pilot study, be given preference over other bidders unable to do so, provided that the cost included in the bid of products made of recycled materials is not more than 10% greater than the cost of products not made of recycled materials.

INDEMNIFICATION CLAUSE: Contractor shall defend, indemnify, keep and save harmless the Board of Trustees, its board members, representatives, officers, agents and employees, in both individual and official capacities, against all suits, claims, damages, losses and expenses, including attorney's fees, caused by, growing out of, or incidental to, performance of work under a contract by contractor or their subcontractors to the full extent which would render these provisions void or unenforceable. In event of any such injury (including death) or loss or damage, or claims therefore, contractor shall give prompt notice to owner.

NON-RESIDENT CLAUSE: In submitting bid to Board of Trustees of Eastern Illinois University, bidder, as a part of bid recognizing that it is non-resident of the State of Illinois, hereby agrees, in event this bid is accepted, bidder will thereupon name an agent corporation, resident within State of Illinois, as a condition precedent, for service of process or notice of any kind, so, in the event of any litigation or controversy resulting between bidder and the said Board of Trustees relationship for EIU arising out of the contractual relationship this created, courts of the State of Illinois will have jurisdiction of Bidder for all such purposes to the same extent as though bidder were a resident of the State of Illinois.

DEPARTMENT OF HUMAN RIGHTS NUMBER: All bids require your Illinois Department of Human Rights (DHRN-previously FEPC) or a certification by bidder that a PC-I Employer Prequalification Form has been filed with commission three (3) days prior to bid due date for vendor to be eligible to bid on contract. Please insert your number on bid form in space provided. If you do not have a DHRN you may write to the following:

Illinois Department of Human Rights
100 W Randolph Suite 10-100
Chicago, IL 60601 (312) 814-2431

I have read the Instructions to Bidders and understand them.

Signature: _____

Print Name: _____

Date: _____

CERTIFICATIONS:

EMPLOYMENT STATUS: The vendor certifies that if any of its personnel are an employee of the State of Illinois, they have permission from their employer to perform the service.

EDUCATIONAL LOANS: Vendor certifies this Agreement is not in violation of Educational Loan Default Act (5 ILCS 385) prohibiting certain contracts to individuals who are in default on an educational loan.

ANTI-BRIBERY: Vendor certifies neither vendor nor any person associated with it has been convicted of bribery or attempting to bribe an officer or employee of this State nor has made admission of guilt of such conduct (30 ILCS 500/50-5(a)).

BID-RIGGING/BID ROTATING LAW: Vendor certifies neither vendor nor any person associated with it has been barred from contracting with a unit of State or local government as result of violation of Section 33E-3 or 33E-4 of Criminal Code of 1961 (720 ILCS 5/33E-3 & 5-33E-4).

FELONY: The vendor certifies that it is not barred pursuant to 30 ILCS 500/50-10 from conducting business with the State of Illinois or any agency as a result of being convicted of a felony and also certifies in accordance with 30 ILCS 500/50-10.5 that no officer, director, partner or other managerial agent of the contracting business has been convicted of a felony under the Sarbanes-Oxley Act of 2002 or a Class 3 or Class 2 felony under the Illinois Securities Law of 1953 for a period of five years prior to the date of the bid or contract. The vendor acknowledges that the University shall declare the contract void if this certification is false.

DRUG FREE WORKPLACE: (30 ILCS 580) requires in part, that vendors with 25 or more employees will provide a drug free workplace as provided in Drug Free Workplace Act. These requirements apply to orders of \$5,000 or more.

RECORDS RETENTION: In accordance with 30 ILCS 500/20-65, vendor (and any subcontractors) shall maintain, for a minimum of 3 years after completion of Agreement, adequate books, records & supporting documents to verify amounts, receipts, & uses of all disbursements of funds passing in conjunction with this Agreement. Records shall be available for review & audit by Auditor General. If this order is funded from contract/grant funds provided by the U.S. Government, the order, books, and records shall be available for review and audit by the Comptroller General of the U.S. and/or the Inspector General of the federal sponsoring agency. Vendor agrees to cooperate fully with any such audit & shall provide full access to all relevant materials. Failure to maintain records required by this provision shall establish a presumption in favor of the State for recovery of any funds paid by State under Agreement for which adequate records are not available to support their purported disbursement.

BOYCOTT: In accordance w/Public Act 88-671, vendor certifies neither it nor any substantially-owned affiliated company is participating or shall participate in an international boycott in violation of provisions of U. S. Export Administration Act of 1979 or the regulations of U S Department of Commerce promulgated under that Act. This certification applies only to purchase orders which exceed \$10,000.

UNLAWFUL DISCRIMINATION AND EQUAL EMPLOYMENT OPPORTUNITY: Vendor agrees to comply with applicable provisions of the Illinois Human Rights Act (775 ILCS 5), The U.S. Civil Rights Act, the Americans with Disabilities Act, Section 504 of the U.S. Rehabilitation Act, and the rules applicable to each. The equal opportunity clause of Section 750.10 of the Illinois Department of Human Rights Rules is specifically incorporated herein. The Contractor shall comply with Executive Order 11246, entitled "Equal Employment Opportunity", and its amendments and as supplemented by U.S. Department of Labor regulations (41 C.F.R. Chapter 60). The Contractor agrees to incorporate this clause into all subcontracts under this order.

CONFLICT OF INTEREST: Vendor certifies it is not a State of Illinois employee, nor is any State of Illinois employee entitled to more than seven & one half percent (7 ½%), or together with a spouse or minor child more than fifteen percent (15%), of the total distributable income of Seller (30 ILCS 500/50-13).

FUNDING OUT CLAUSE: Obligations of the State shall cease immediately without penalty or future payment being required if, in any fiscal year, the Illinois General Assembly or federal funding source fails to appropriate or otherwise make available funds for purchase.

PRINTING SERVICE: If order is \$2,000 or more, employees who are to produce the printing are receiving the prevailing wage rate & are working under conditions prevalent in the locality where the work is to be performed (30 ILCS 500/25-60). Unless otherwise indicated, printing must be produced using soybean oil-based ink (50 ILCS 520/10).

PREVAILING WAGE: When applicable, all vendors must include payment of prevailing wages to all workers, in accordance with the Illinois Department of Labor, Rules and Regulations and the Current Prevailing Wage Rate Table for Coles County, Illinois (820 ILCS 130/3 et. seq.).

LABOR CERTIFICATION: The vendor certifies in accordance with 30 ILCS 583/10 that no foreign-made equipment, materials, or supplies furnished to the State under the contract have been produced in whole or in part by forced labor, convict labor, or indentured labor under penal sanction.

ENVIRONMENTAL CERTIFICATION: The vendor certifies in accordance with 30 ILCS 500/50-14 that it has not been found by a court or the Pollution Control Board to have committed a willful or knowing violation of the Environmental Protection Act for a period of five years prior to the date of the bid or contract. The Vendor acknowledges that the University shall declare the contract void if this certification is false.

PRICES: The commodities and/or services furnished on this order shall not exceed those charged to your most favored customer for like commodities and/or services under similar circumstances.

RECYCLED MATERIALS (30 ILCS 500/45-30): When a public contract is to be awarded to the lowest responsible bidder, an otherwise qualified bidder who will fulfill the contract through the use of products made of recycled materials may, on a pilot basis or in accordance with a pilot study, be given preference over other bidders unable to do so, provided that the cost included in the bid of products made of recycled materials is not more than 10% greater than the cost of products not made of recycled materials.

DEBT CERTIFICATION: The vendor certifies that it, or any affiliate, is not barred from being awarded a contract under 30 ILCS 500. Section 50-11 prohibits a person from entering into a contract with a State agency if it knows or should know that it, or any affiliate, is delinquent in the payment of any debt to the State as defined by the Debt Collection Board. Section 50-12 prohibits a person from entering into a contract with a State agency if it, or any affiliate, has failed to collect and remit Illinois Use Tax on all sales of tangible personal property into the State of Illinois in accordance with the provisions of the Illinois Use Tax Act. The vendor further acknowledges that the University may declare the contract void if the preceding certification is false or if the vendor, or any affiliate, is determined to be delinquent in the payment of any debt to the State during the term of the contract.

PROHIBITION OF GOODS FROM CHILD LABOR: The vendor certifies in accordance with Public Act 94-0264 that no foreign-made equipment, material, or supplies furnished to the State under the contract have been produced in whole or in part by the labor of any child under the age of 12.

PLEASE NOTE: Eastern Illinois University pays all invoices in accordance with the State of Illinois Prompt Payment Act (30 ILCS 540).

IF THIS CONTRACT IS FEDERALLY FUNDED, THE VENDOR CERTIFIES THAT:

DEBARMENT AND SUSPENSION (E.O.s 12549 and 12689): Vendor certifies that it is not debarred, suspended or otherwise excluded from or ineligible for participation in Federal assistance programs or activities.

COPELAND "ANTI-KICKBACK" ACT (18 U.S.C. 874 and 40 U.S.C. 276c): (pertains to construction or repair contracts over \$2,000) The vendor and its subcontractors certifies that it complies with the Copeland Anti-Kickback Act which provides that each contractor or subcontractor is prohibited

from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he is otherwise entitled. The recipient shall report all suspected or reported violations to the Federal awarding agency.

CONTRACT WORK HOURS AND SAFETY STANDARDS ACT (40 U.S.C. 327-333): (pertains to construction contracts over \$2000 and mechanics and laborers contracts over \$2500) Vendor certifies that it complies with the Sections 102 and 107 of the Contract Work Hours and Safety Standards Act. Section 102 requires contractors to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours with compensation of 1 1/2 times the basic rate of pay for all hours worked in excess of the 40 hours. Section 107 provides that no laborer or mechanic shall be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous.

RIGHTS TO INVENTIONS MADE UNDER A CONTRACT OR AGREEMENT: (pertains to contracts for performance of experimental, developmental, or research work) Any resulting contract or agreement for the performance of experimental, developmental, or research work shall provide for the rights of the Federal Government and the recipient in any resulting invention in accordance with 37 CFR part 401.

CLEAN AIR ACT (42 U.S.C. 7401 ET SEQ.) AND THE FEDERAL WATER POLLUTION CONTROL ACT (33 U.S.C. 1251 et seq.), as amended: (pertains to contracts over \$100,000) Vendor certifies that it and its subcontractor(s) comply with all applicable standards, orders or regulations issued pursuant to this Clean Air Act and this Federal Water Pollution Control Act.

BYRD ANTI-LOBBYING AMENDMENT (31 U.S.C. 1352): (pertains to contracts over \$100,000.) Vendor and its subcontractors certify that Federal appropriated funds have not and will not be used to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. The contractor and its subcontractor(s) shall disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

MINORITY OWNED BUSINESS means a business concern which is at least 51% owned by one or more minority persons, or in the case of a corporation, at least 51% of the stock which is owned by one or more minority persons & the management & daily operations of which are controlled by one or more of the minority individuals who own it. Minority shall mean a person who is a citizen or lawful permanent resident of the United States & who is Black, Hispanic, Asian American, American Indian or Alaskan Native. For clarification of ethnic categories, contact the Minority & Female Business Enterprise Division of the Illinois Department of Central Management Services. New State of Illinois legislation (Public Act 87-701) amends the BEP Act to include qualified disabled persons as a minority group.

___ Check here if you have been certified by the Minority & Female Business Enterprise Division of the IL Dept of Central Management Services & show your BEP # _____. We reserve the right to verify this information with CMS.

Public Act 87-701 states the BEP goal for State contracts is 19 % and requires that at least 1/6 of the total amount of State contracts awarded under the BEP Act shall be awarded to businesses controlled at least 51 percent owned by disabled persons, or to not-for-profit agencies employing disabled persons. ****WE ARE REQUIRED BY STATE LAW TO PROVIDE THIS INFORMATION TO THE MINORITY & FEMALE BUSINESS ENTERPRISE DIVISION.****

TAXPAYER IDENTIFICATION NUMBER (TIN): Enter taxpayer identification number in appropriated space on Bid Form. For individuals & sole proprietors, this is social security number. For other entities, it is employer identification number. Federal Employer Identification number (FEINs) must not be used for sole proprietorships. If you fail to furnish correct TIN to Agency, you are subject to an IRS penalty of \$50 for each such failure unless your failure is due to reasonable cause & not to willful neglect.

WILLFULLY FALSIFYING CERTIFICATIONS OR AFFIRMATIONS MAY RESULT IN CRIMINAL PENALTIES INCLUDING FINES AND/OR IMPRISONMENT.

LEGAL STATUS: Under penalties of perjury, I certify _____ is my correct Federal Taxpayer Identification Number. If using SS# as your FEIN, state name that coincides with SS# _____.

I am doing business as a: (CHECK WHERE APPROPRIATE)

- | | | |
|-------------------------|-------------------------|---|
| ___ Individual | ___ Governmental Entity | ___ Not-for-Profit Corporation |
| ___ Sole Proprietorship | ___ Real Estate Agent | ___ Tax Exempt Organization (IRC 501)(a) only |
| ___ Corporation | ___ Trust or Estate | ___ Medical & Health Care Services Provider |

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.

Check the statement below that applies to the articles you are offering in this bid/proposal:

For the purpose of this question, "manufactured in the United States" means in the case of assembled articles that final assembly occurred in the United States.

___ **We certify that all offered articles were/will be manufactured in the United States.**

We understand that, if we are awarded a contract based on a preference for US manufactured goods under the Procurement of Domestic Products Act (PA 93-0954), this certification will become part of the contract. And, if we knowingly supply non-US manufactured goods, we will be subject to penalties that include debarment for 5 years, voiding of the contract, and civil damages.

___ **We are unable to certify that all offered articles were/will be manufactured in the United States.**

COMPANY NAME _____ TELEPHONE _____ FAX _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ EMAIL _____

SIGNATURE _____ Title _____ Date _____

PRINT NAME _____

DISCLOSURES

FINANCIAL INTERESTS AND POTENTIAL CONFLICTS OF INTERESTS

(Disclosure Form A)

Public Act 90-572 (Section 50-35 a-b) requires that vendors desiring to enter into certain contracts with the State of Illinois must disclose the financial and potential conflict of interest information as specified below.

Vendor shall disclose the financial interest and potential conflict of interest information identified in Sections 1 and 2 below as a condition of receiving an award or contract. Submit this information along with your bid, proposal, or offer.

This requirement applies to contracts with an annual value exceeding \$10,000.

A publicly traded entity may submit its 10K disclosure in satisfaction of the disclosure requirements set forth in both Sections 1 and 2 below. A privately held entity with more than 400 shareholders may satisfy the disclosure requirements of both Sections by (1) submitting the information that would be included in a 10K disclosure and (2) listing the names of all persons or entities holding an ownership interest in excess of 5%.

Section 1 - Disclosure of Financial Interest in the Vendor

a. If any individuals have one of the following financial interest in the vendor (or its parent), please check all that apply and show their name and address:

- Ownership exceeding 5% ()
 - Ownership value exceeding \$90,414.60 ()
 - Distributive Income Share exceeding 5% ()
 - Distributive Income Share exceeding \$90,414.60 ()
 - No individuals have any of the above financial interests ()
- (If none, go to Disclosure Form B)

Name: _____

Address: _____

b. For each individual named above, show the type of ownership/distributable income share:

sole proprietorship ___ stock ___ partnership ___
other (explain) _____

c. For each individual named above, show the dollar value or proportionate share of the ownership interest in the vendor (or its parent) as follows:

If the proportionate share of the named individual(s) in the ownership of the vendor (or its parent) is 5% or less, and if the value of the ownership interest of the named individual(s) is \$90,414.60 or less, check here ().

If the proportionate share of ownership exceeds 5%, or the value of the ownership interest exceeds \$90,414.60, show either:

the percent of ownership _____%,
or
the value of the ownership interest \$_____.

For each of the individuals having the level of financial interest identified in Section 1 above, check "Yes" or "No" to indicate which, if any, of the following potential conflict of interest relationships apply. If "Yes," please describe (use space under applicable section-attach additional pages as necessary).

- | | | | |
|----|--|------------------|-----------------|
| a. | State employment, currently or in the previous 3 years, including contractual employment for services. | Yes

_____ | No

_____ |
| b. | State employment of spouse, father, mother, son, or daughter, including contractual employment for services in the previous 2 years. | Yes

_____ | No

_____ |
| c. | Elective status; the holding of elective office of the State of Illinois, the government of the United States, any unit of local government authorized by the Constitution of the State of Illinois or the statutes of the State of Illinois currently or in the previous 3 years. | Yes

_____ | No

_____ |
| d. | Relationship to anyone holding elective office currently or in the previous 2 years; spouse, father, mother, son, or daughter. | Yes

_____ | No

_____ |
| e. | Appointive office; the holding of any appointive government office of the State of Illinois, the United States of America, or any unit of local government authorized by the Constitution of the State of Illinois or the statutes of the State of Illinois, which office entitles the holder to compensation in excess of expenses incurred in the discharge of that office currently or in the previous 3 years. | Yes

_____ | No

_____ |
| f. | Relationship to anyone holding appointive office currently or in the previous 2 years; spouse, father, mother, son, or daughter. | Yes

_____ | No

_____ |
| g. | Employment, currently or in the previous 3 years, as or by any registered lobbyist of the State government. | Yes

_____ | No

_____ |
| h. | Relationship to anyone who is or was a registered lobbyist in the previous 2 years; spouse, father, mother, son, or daughter. | Yes

_____ | No

_____ |
| i. | Compensated employment, currently or in the previous 3 years, by any registered election or re-election committee registered with the Secretary of State or any county clerk in the State of Illinois, or any political action committee registered with either the Secretary of State or the Federal Board of Elections. | Yes

_____ | No

_____ |
| j. | Relationship to anyone; spouse, father, mother, son, or daughter; who is or was a compensated employee in the last 2 years of any registered election or re-election committee registered with the Secretary of State or any county clerk in the State of Illinois, or any political action committee registered with either the Secretary of State or the Federal Board of Elections. | Yes

_____ | No

_____ |

DISCLOSURES

OTHER CONTRACT AND PROCUREMENT RELATED INFORMATION

(Disclosure Form B)

Public Act 90-572 (Section 50-35 h) requires that vendors desiring to enter into certain contracts with the State of Illinois must disclose the information as specified below.

Vendor shall disclose the information identified below as a condition of receiving an award or contract.

This requirement is applicable to only those contracts with an annual value exceeding \$10,000.

You must submit this information along with your bid, proposal, or offer.

- a. Vendor shall identify whether it has current contracts (including leases) with other units of State of Illinois government by checking "Yes" _____ or "No" _____
- b. If "yes" is checked, identify each contract by showing agency name and other descriptive information such as purchase order or contract reference number (attach additional pages as necessary).
- c. Vendor shall identify whether it has pending contracts (including leases), bids, proposal, or other ongoing procurement relationships with other units of State of Illinois government by checking "Yes" ____ or "No" ____.

If "yes" is checked, identify each such relationship by showing agency name and other descriptive information such as bid or project number (attach additional pages as necessary).

This disclosure for Form A and B are submitted on behalf of

(Name of Vendor)

Official authorized to sign on behalf of vendor:

Name (Printed)_____ Title_____

Signature_____ Date_____

"NOTE: RESPONDENT MUST COMPLETE THE ABOVE "VENDOR'S DISCLOSURE OF FINANCIAL INTERESTS" FORM. FAILURE TO COMPLETE AND RETURN THIS FORM WITH YOUR OFFER MAY RESULT IN YOUR OFFER BEING CONSIDERED AS "NON-RESPONSIVE" TO THIS SOLICITATION."

INSURANCE REQUIREMENTS

The Vendor/Contractor shall cause a Certificate of Insurance to be issued indicating the bid/and or purchase order number and showing the following required coverage in no less than the minimum coverage limits listed below. The insurance companies providing coverage must have a current A.M. Best rating of B++;VII or better and be duly authorized by the Department of Insurance of the State of Illinois to do business in Illinois. The Vendor/Contractor must agree to maintain such insurance for the duration of the contract or the term for which services will be rendered.

- | | | |
|----|---|---------------------------------|
| A. | Worker's Compensation
(including Occupational Disease) | - Statutory Limits (Illinois) |
| | Employer's Liability (Part B) | - \$500,000 per occurrence |
| | | |
| B. | Commercial General Liability
(including Products & Completed Operations) | |
| | Combined Single Limit | - \$1,000,000 per occurrence |
| | | OR |
| | Bodily Injury: | \$1,000,000 per occurrence, and |
| | Physical Damage: | \$1,000,000 per occurrence |
| | | |
| C. | Commercial Automobile Liability | |
| | Combined Single Limit | - \$1,000,000 per occurrence |
| | | OR |
| | Bodily Injury: | \$1,000,000 per occurrence, and |
| | Physical Damage: | \$1,000,000 per occurrence |

With respect to Commercial General Liability and Automobile Liability insurance, the Board of Trustees of Eastern Illinois University shall be named as an additional insured for any liability incurred by the University arising from activities of the Vendor/Contractor.

The Vendor/Contractor shall furnish the Department of Procurement, Disbursements and Contract Services, Room 1135 Old Main, Eastern Illinois University, 600 Lincoln Avenue, Charleston, Illinois 61920, original Certificate(s) of Insurance evidencing the required coverage to be in force on the date of this agreement, and renewal Certificates of Insurance if coverage has an expiration or renewal date occurring during the term of this agreement. All certificates shall provide that the University be given thirty (30) days written notice prior to any change, substitution or cancellation before the stated expiration date.

The receipt of any certificate does not constitute agreement by the University that insurance requirements have been met. Failure of the University to obtain certificates or other insurance evidence from the Vendor/Contractor shall not be deemed a waiver by the University.

Assigned Subcontractors must comply with the same insurance coverage requirements as the Vendor/Contractor. Subcontractors shall secure a Certificate of Insurance naming the Board of Trustees of Eastern Illinois University as an additional insured and shall submit such Certificate(s) of Insurance through the Vendor/Contractor. The bid and/or purchase order number must be indicated on the Certificate.

Please complete and sign below if specified insurance coverage can be furnished.

Printed Name of Organization _____

Signature of Authorized Representative _____

Printed Name and Title _____

Date _____

STATE OF ILLINOIS DRUG FREE WORKPLACE CERTIFICATION

This certification is required by the Drug Free Workplace Act (30 ILCS 580/1 et seq.). The Drug Free Workplace Act, effective January 1, 1992, requires that no grantee or contractor shall receive a grant or be considered for the purpose of being awarded a contract for the procurement of any property or services from the State unless that grantee or contractor has certified to the State that the grantee or contractor will provide a drug free workplace. False certification or violation of the certification may result in sanctions including, but not limited to, suspension of contract or grant payments, termination of the contract or grant and debarment of contracting or grant opportunities with the State for at least one (1) year but not more than five (5) years.

For the purpose of this certification, "grantee" or "contractor" means a corporation, partnership, or other entity with twenty-five (25) or more employees at the time of issuing the grant, or a department, division, or other unit thereof; directly responsible for the specific performance under a contract or grant of \$5,000 or more from the State.

The contractor/grantee certifies and agrees that it will provide a drug free workplace by:

- (A) Publishing a statement:
 - (1) Notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance, including cannabis, is prohibited in the grantee's or contractor's workplace.
 - (2) Specifying the actions that will be taken against employees for violations of such prohibition.
 - (3) Notifying the employee that, as a condition of employment on such contract or grant, the employee will:
 - (a) abide by the terms of the statement; and
 - (b) notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- (B) Establish a drug free awareness program to inform employees about:
 - (1) the dangers of drug abuse in the workplace;
 - (2) the grantee's or contractor's policy of maintaining a drug free workplace;
 - (3) any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) the penalties that may be imposed upon an employee for drug violations.
- (C) Providing a copy of the statement required by subparagraph (A) to each employee engaged in the performance of the contract or grant and to post the statement in a prominent place in the workplace.
- (D) Notifying the contracting or granting agency within ten (10) days after receiving notice under part (b) of Paragraph (3) of subsection (A) above from an employee or otherwise receiving actual notice of such conviction.
- (E) Imposing a sanction on, or requiring the satisfactory participation in a drug abuse assistance or rehabilitation program by any employee who is so convicted, as required by section 5 of the Drug Free Workplace Act.
- (F) Assisting employees in selecting a course of action in the event drug counseling, treatment and rehabilitation is required and indicating that a trained referral team is in place.
- (G) Making a good faith effort to continue to maintain a drug free workplace through implementation of the Drug Free Workplace Act.

THE UNDERSIGNED AFFIRMS, UNDER PENALTIES OF PERJURY, THAT HE OR SHE IS AUTHORIZED TO EXECUTE THIS CERTIFICATION ON BEHALF OF THE DESIGNATED ORGANIZATION.

Printed Name of Organization

Signature of Authorized Representative

Printed Name and Title

Date

EXTENSION OF OFFER TO OTHER ILLINOIS UNIVERSITIES

The University is hereby offering those Proposers who receive an award as the result of this solicitation the opportunity to also extend their bid offer to other State Universities in Illinois. Should you accept this opportunity if you receive an award, the following conditions will be applicable:

- A.** Each State of Illinois university choosing to participate in this transaction will administer its own procurements directly with your company subject to individual university administrations and governing board approvals.
- B.** The decision whether or not to participate will be up to each university.
- C.** If your firm agrees to extend your offer to the other universities, a copy of your offer will be provided to each of the universities' purchasing officers and those universities that choose to participate will use it as a basis for contracting with your firm.
- D.** Any contracts and/or purchase orders the Proposer receives from these universities will be administered (such as, but not limited to, resolution of ordering problems and reconciling accounts payable issues) by the individual university and not by Eastern Illinois University.
- E.** Please complete the following information.

Will you extend your offer to the other State of Illinois universities?

Yes _____ No _____

If yes, until what date will this offer be extended? _____

Signature

EASTERN ILLINOIS UNIVERSITY
Charleston, Illinois 61920

BIDDER:

RE: Department # _____
Requisition # _____
Due Date _____

To assist us in obtaining good competition on our request for bids, we ask that each firm which received an invitation but does not wish to bid, state their reason(s) below. This information will not preclude receipt of future invitations unless you request removal from the Bidder's List by so indicating below.

Sincerely,

Monty Bennett
Director,
Department of Procurement, Disbursements
and Contract Services

We hereby submit a "NO BID" because

- _____ 1. We are not interested in selling through the Bid Process.
- _____ 2. We do not wish to bid under the terms and conditions of the Request for Bid document.

- _____ 3. We do not feel we can be competitive.
- _____ 4. We cannot submit a bid because of the marketing or franchising policies of the manufacturing company.
- _____ 5. We do not wish to sell to a State Agency.
Objections: _____

- _____ 6. We do not sell the items on which bids are requested.
- _____ 7. Other: _____

- _____ 8. We wish to remain on the List of Bidders.
- _____ 9. We wish to be deleted from the List of Bidders.

Firm: _____

Signed: _____

Business Name _____

Bidder Application Form

Illinois Public Higher Education (IPHE)

This requested information is required to accomplish the statutory purpose of the Illinois Procurement Code [30 ILCS 500].

Instructions: Please type or print. You must respond to all questions, sign the form, and submit it to the appropriate university. If your answer is "same," "not applicable," or "none," please write this to indicate no questions have been overlooked. It is your responsibility to notify the issuing university if the information in this application changes.

Today's date _____ This application is: Initial application Revision of previously submitted application

Submit this completed form to the university closest to you or the university with whom you intend to do the most business. Check that university below:

<input type="checkbox"/> Director of Purchases Chicago State University 9501 King Drive Chicago, IL 60628-1598	<input type="checkbox"/> Director of Procurement Services Northern Illinois University B-113 Gilbert Hall DeKalb, IL 60115-2870	<input type="checkbox"/> Director of Purchases University of Illinois at Chicago Room 312 - M.A.B. (MC-560) 809 South Marshfield Avenue Chicago, IL 60612-7203
<input type="checkbox"/> Director of Purchases Eastern Illinois University Room 113 Old Main Charleston, IL 61920-3099	<input type="checkbox"/> Director of Purchasing Southern Illinois University Bldg 108 - Miles Hall Carbondale, IL 62901-6813	<input type="checkbox"/> University of Illinois at Springfield Purchasing BSB 106 PO Box 19243 4900 Shepherd Road Springfield, IL 62794
<input type="checkbox"/> Purchasing Office Governors State University University Park, IL 60466-0975	<input type="checkbox"/> Director of Purchasing Southern Illinois University Box 1012 Edwardsville, IL 62026-1012	<input type="checkbox"/> Director of Purchases University of Illinois at Urbana- Champaign Purchasing Division 616 E. Green, Suite 212 Champaign, IL 61820-5752
<input type="checkbox"/> Director of Purchases 1220 Illinois State University Normal, IL 61790-1220	<input type="checkbox"/> Director of Procurement Services SIU Medical School P.O. Box 19605 Springfield, IL 62794-9605	<input type="checkbox"/> Director of Purchases Western Illinois University One University Circle Room 227 Sherman Hall Macomb, IL 61455-1390
<input type="checkbox"/> Assistant Director Purchasing Department Northeastern Illinois University 5500 North St. Louis Avenue Chicago, IL 60625-4699		

If you wish to be included on the bid list for other universities, copy this form and submit it to the other universities.

1. Legal name/address to which solicitations are to be mailed:	2. Address to which purchase orders are to be mailed, if different:
3. Address to which payment is to be mailed, if different:	4. Contact person: Phone number: 800 number: FAX number: E-mail:
5. If a division of a corporation, show name and address of parent company: State of incorporation _____	6. Years in business U.S. owned business: <input type="checkbox"/> Yes <input type="checkbox"/> No

7. Legal and tax status – I certify, under penalty of perjury, that I/we do business as a (check one only):

<input type="checkbox"/> Individual	<input type="checkbox"/> Real Estate Agent
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Government Entity
<input type="checkbox"/> Partnership	<input type="checkbox"/> Tax Exempt Organizations (IRC 501 (a) only)
<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust or Estate
<input type="checkbox"/> Not-for-Profit Corporation	<input type="checkbox"/> Limited Liability Corporation
<input type="checkbox"/> Medical Health Care Services Provider Corp.	

Business Name _____

8. Enter your Taxpayer Identification Number (use Social Security Number if individual or sole proprietorship):

FEIN _____

SSN _____

9. **Enter your Illinois Department of Human Rights (IDHR) number.** Failure to do so will delay the processing of your application. If your IDHR number is 89999-00-0 or lower, you must re-register with the Illinois Department of Human Rights.

IDHR Contractor Registration Number _____

Exempt

If you employ 15 or more individuals and wish to bid on State of Illinois contracts, IDHR requires that you file an Employers Report Form - Form PC-1 before bid opening. You may obtain a PC-1 form through IDHR at (312) 814-2431, TDD (312) 263-1579, or www.state.il.us/cms/purchase/download. All persons (or firms) employing 14 or fewer individuals at all times during the past 365 days are exempt from the IDHR requirement and should check the "Exempt" box above.

10. Is your firm authorized to do business in the State of Illinois, as well as locally, with all necessary business licenses?

Yes

No

If no, please explain

11. Net worth of business:

12. Bank reference - name and address:

13. Total sales and receipts (include amounts for all affiliated businesses) for most recent fiscal year:

14. Special Programs – Complete all of 14 (A – D).

The public higher education institutions of Illinois have various special programs that may be available to your company. Please check each category which applies, and complete the requested information. You may be requested to complete a more detailed form and provide additional documentation in order to ensure eligibility.

(A) Small business. See 30 ILCS 500/45-45. To participate as a small business you must qualify under the following definition and criteria:

“Small business” means a business that is independently owned and operated and is not dominant in its field of operation (that is, it does not exercise a controlling or major influence in a kind of activity in which a number of business concerns are primarily engaged). To compute your size status, include your (and your affiliates’) annual sales and receipts, subject to the following limitations:

Wholesale business – annual sales for the most recently completed fiscal year cannot exceed \$7,500,000

Submit a copy of the latest year’s Federal and State income tax return page(s) showing total annual gross sales for the company and an Illinois address. If both a wholesaler and retailer, the combined wholesale and retail annual sales for the latest year of tax filing shall not exceed \$9 million. The retail component shall not exceed \$1.5 million and the wholesale component shall not exceed \$7.5 million. Businesses desiring to qualify under the combined status must also submit a notarized statement delineating the retail and wholesale dollar components.

Retail business or business selling services – annual sales and receipts cannot exceed \$1,500,000

Submit a copy of the latest year’s Federal and State income tax return page(s) showing total annual gross sales for the company and an Illinois address. If both a wholesaler and retailer, the combined wholesale and retail annual sales for the latest year of tax filing shall not exceed \$9 million. The retail component shall not exceed \$1.5 million and the wholesale component shall not exceed \$7.5 million. Businesses desiring to qualify under the combined status must also submit a notarized statement delineating the retail and wholesale dollar components.

Manufacturing business – cannot employ more than 250 persons

Submit a copy of the latest year’s Federal or State income tax return page(s) showing an Illinois address and the latest year’s form IL-W-3 (Illinois Annual Withholding Income Tax Return) showing the number of Forms W-2, W-2G, and 1099-R issued (denotes number of employees at the company). If a manufacturing business has been in existence for less than a full fiscal year, its average employment shall be calculated for the period through one month prior to the bid or proposal due date. In such cases, a notarized statement to that effect and proof of when the business came into existence shall be submitted.

Construction business – annual sales and receipts cannot exceed \$10,000,000

Submit a copy of the latest year’s Federal and State income tax return page(s) showing total annual gross sales for the company and an Illinois address.

Business Name _____

(B) Minority, Female, Person with Disability. See 30 ILCS 575. To participate in this you must qualify under the following criteria and be certified by one of the following:

- DCMS (Department of Central Management Services) Business Enterprise Program
- CMBDC (Chicago Minority Business Development Council)
- IDOT (Illinois Department of Transportation)
- WBDC (Women's Business Development Center)

The business must be at least 51% owned and controlled by one or more individuals who are minority, female, or a person with disabilities. A business owned and controlled at least 51% by any combination of minorities, females, and persons with disabilities should be checked as a business owned and controlled by the eligible group that has the largest percentage of ownership. If this block is checked, also check each of the following which are applicable:

- African American
- Hispanic
- Person with disability (must be severe mental or physical disabilities which substantially limit major life activities)
- Female
- Native American/Alaskan
- Asian American

(C) Not-for-profit, U.S. tax exempt agency for the disabled. You must qualify under Section 501 of the Internal Revenue Code. See 30 ILCS 575/2A4.1.

(D) State use – Not-for-profit agency for the severely handicapped. Must meet requirements of U.S. Department of Labor and the Illinois Department of Rehabilitation Services. See 30 ILCS 500/45-35.

15. In compliance with the Illinois Procurement Code, state the name of each person or company having a beneficial interest of more than 7½% in the bidding enterprise and each person or company, who, together with spouse or minor children, has a beneficial interest of more than 15% in the bidding enterprise (attach additional sheets if necessary):

Name and Address	Percent Owned	Voting Percentage
------------------	---------------	-------------------

If applicant is a corporation, please complete both columns:

Names of Corporate Officers	Names of Corporate Directors
-----------------------------	------------------------------

16. List equipment, supplies, and/or services you can provide. Include brand and manufacturer names or other information that will help buyers to categorize your capabilities. (Additional items may be submitted on an attached sheet.) If the issuing university has provided a separate listing of equipment, supplies, and/or services, provide requested information and return it with this form. If the services available from your firm include professional and/or artistic services (see Item #17 for listing), and you wish to be pre-qualified so you can receive direct notification of opportunities, complete Items #17-24 of this application.

Fill out this section to pre-qualify as a provider of Professional and Artistic Services

If you do not offer such services, or do not wish to pre-qualify, proceed to Item #24.

Completing this section does not guarantee that you will be pre-qualified. Being pre-qualified does not guarantee that you will be awarded a contract. You do not need to be pre-qualified to respond to a solicitation (Illinois Procurement Code [30 ILCS 500/35-15]). Consult the universities' solicitations to determine specific qualification requirements for individual solicitations.

Automatic notification – Once you have been pre-qualified you will be entitled to receive an automatic notification of Procurement Bulletin solicitations for services for which you have pre-qualified if you have listed a FAX number and/or e-mail address as requested in Item #4.

Do not use this section to pre-qualify for construction or construction-related professional services. Contact the university with whom you wish to do business for information regarding specific requirements for these categories.

17. Please check the professional and artistic services for which you are requesting pre-qualification. For each service you check, provide the information requested in Items #17-23 of this application.

<p>Accounting</p> <input type="checkbox"/> Accountant <input type="checkbox"/> Auditor <input type="checkbox"/> Billing Services <input type="checkbox"/> Collection Services	<p>Dentistry</p> <input type="checkbox"/> Dentist <input type="checkbox"/> Orthodontist <input type="checkbox"/> Periodontist	<p>Management/ Administrative Services</p> <input type="checkbox"/> Actuary <input type="checkbox"/> Banking Services <input type="checkbox"/> Consultant <input type="checkbox"/> Economist <input type="checkbox"/> Executive Search Services <input type="checkbox"/> Investment Services <input type="checkbox"/> Training and Development	<p>Medicine</p> <input type="checkbox"/> Audiologist <input type="checkbox"/> Chiropractor <input type="checkbox"/> Dietician <input type="checkbox"/> Medical Transcriber <input type="checkbox"/> Nurse <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Optometrist <input type="checkbox"/> Orthopedist <input type="checkbox"/> Pathologist <input type="checkbox"/> Pharmacist <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Physician <input type="checkbox"/> Podiatrist <input type="checkbox"/> Radiologist <input type="checkbox"/> Surgeon <input type="checkbox"/> Temporary Medical Staffing <input type="checkbox"/> Veterinarian
<p>Artistic</p> <input type="checkbox"/> Artist <input type="checkbox"/> Entertainer <input type="checkbox"/> Musician <input type="checkbox"/> Sculptor	<p>Environmental/Land</p> <input type="checkbox"/> Cartographer <input type="checkbox"/> Environmental Analyst <input type="checkbox"/> Environmental Engineer <input type="checkbox"/> Geologist <input type="checkbox"/> Hydrologist <input type="checkbox"/> Land Appraiser <input type="checkbox"/> Land Use Planner <input type="checkbox"/> Meteorologist <input type="checkbox"/> Naturalist	<p>Marketing And Media Services</p> <input type="checkbox"/> Audio and Video Production <input type="checkbox"/> Commercial Photographer <input type="checkbox"/> Editor <input type="checkbox"/> Graphic Designer <input type="checkbox"/> Media Consultant <input type="checkbox"/> Public Relations	<p>Science/Research</p> <input type="checkbox"/> Archaeologist <input type="checkbox"/> Biologist <input type="checkbox"/> Botanist <input type="checkbox"/> Chemist <input type="checkbox"/> Educator <input type="checkbox"/> Entomologist <input type="checkbox"/> Historian <input type="checkbox"/> Other
<p>Clinical Psychology</p> <input type="checkbox"/> Psychotherapist <input type="checkbox"/> Psychiatrist	<p>Law</p> <input type="checkbox"/> Administrative Law Judge <input type="checkbox"/> Arbitrator <input type="checkbox"/> Attorney <input type="checkbox"/> Court Reporting <input type="checkbox"/> Hearing Officer <input type="checkbox"/> Law Clerk <input type="checkbox"/> Legal Services		
<p>Data Processing</p> <input type="checkbox"/> Consultant <input type="checkbox"/> Network Design <input type="checkbox"/> Programmer <input type="checkbox"/> Systems Analyst			

18. Licenses and/or professional registration – List names of each key person of the firm. If a requested service requires a licensed/registered practitioner, you may be required to provide a copy of such license/registration to the university before an award can be made or work begun.

Name	Capacity (Owner, Partner, Etc.)	Current Licenses/Registrations (Include Certificate # if Applicable)	License/Registration Exp. Date

Business Name _____

19. Work experience – List contracts for similar services that have been completed within the last five years:

Project	Location	Type of Service	Total Amount of Contract	Start/Completion Dates	Name/Phone # of Owner or Other Reference

20. Resume of key personnel – Provide the requested information for key personnel who would be assigned to work on contracts awarded or who would, at a minimum, supervise such work.

Name and Title	Primary Responsibilities	Years Experience (This Firm/Other Firms)	Education (Institutions, Years, Degrees, Certificates)	Other Relevant Experience and/or Qualifications

21. Judgments and claims – Are there any judgments, claims, or suits pending or outstanding against you or your organization that could affect the ability to complete any contract awarded?
 Yes No If yes, please explain:

22. Receivership – Have you or your organization filed for bankruptcy, receivership, or reorganization within the last five years?
 Yes No If yes, please provide details:

23. Statutory qualifications – Are you or your organization disqualified, ineligible, suspended, or otherwise barred from receiving solicitations and/or awards from any State of Illinois university or agency or any agency of the Federal Government?
 Yes No If yes, please provide details:

Business Name _____

24. I understand that:

Information provided in this application may be audited by any State university or verified by other means.

Provision of information in this application does not relieve me from providing the same or additional information as required in a response to a solicitation.

Submittal of this application does not guarantee pre-qualification. Pre-qualification will be given only if I meet all statutory or regulatory requirements, including any that may not be listed in this application.

I must update significant information changes within a reasonable amount of time. Significant changes include, but are not limited to: change of legal status, TIN, ownership, name, address, as well as loss of licensure or registration, filing of bankruptcy, or suspension or debarment by any Federal, state, or local governmental agency.

Failure to provide accurate and reliable information required by this form may, in accordance with any and all applicable laws, result in penalties including, but not limited to, suspension or debarment from doing business with any university and termination of contracts, and loss of profits in appropriate cases.

Under penalty of perjury, I swear or affirm that:

The information provided in this application is true and correct as of the time of signing.

I have not been barred from contracting with a unit of State or local government as a result of a violation of Section 33-E or 33E-4 of the Criminal Code of 1961.

I, along with other officers and employees, have not been convicted of bribery nor attempted bribery of an officer or employee of the State of Illinois, nor have made an admission of guilt of such conduct that is a matter of record.

I am an equal opportunity employer and in compliance with the equal opportunity requirements of applicable state and federal laws.

Signature _____

Name (type or print) _____

Date _____

Title _____

CLASS LIST

Please place a checkmark by the items you are interested in supplying\

- | | |
|--|--|
| <input type="checkbox"/> 005 Abrasives | <input type="checkbox"/> 290 Energy Collecting Equipment & Accessories: Solar & Wind |
| <input type="checkbox"/> 010 Acoustical Tile, Insulating Materials & Supplies | <input type="checkbox"/> 295 Elevators, Building Type |
| <input type="checkbox"/> 015 Addressing, Copying, Mimeograph & Spirit Duplicating Machine
Supplies: Chemicals, Inks, Paper, Etc. | <input type="checkbox"/> 300 Embossing & Engraving |
| <input type="checkbox"/> 020 Agricultural Implements & Accessories | <input type="checkbox"/> 305 Engineering Equip., Surveying Equip., Drawing Instruments &
Supplies |
| <input type="checkbox"/> 022 Agricultural Major Implement & Accessory Parts | <input type="checkbox"/> 310 Envelopes, Plain or Printed |
| <input type="checkbox"/> 025 Air Compressors & Accessories | <input type="checkbox"/> 315 Epoxy Based Formulations (2-Component)(For 1-Component Oil
Modified Epoxy Coatings – See Class 630) |
| <input type="checkbox"/> 031 Air Conditioning, Heating & Ventilating Equipment, Parts &
Accessories (See Related Items in Class 740) | <input type="checkbox"/> 320 Fasteners, Fastening Devices, Package Stitching, Strapping & Tying
Equipment & Supplies |
| <input type="checkbox"/> 035 Aircraft Equipment, Parts & Supplies | <input type="checkbox"/> 325 Feed & Bedding (For Animal & Fowl) |
| <input type="checkbox"/> 040 Animals, Bees, Livestock & Poultry | <input type="checkbox"/> 330 Fencing |
| <input type="checkbox"/> 045 Appliances & Equipment, Household Type | <input type="checkbox"/> 335 Fertilizers & Soil Conditioners |
| <input type="checkbox"/> 050 Art Equipment & Supplies | <input type="checkbox"/> 340 Fire Protection Equipment & Supplies |
| <input type="checkbox"/> 052 Art Objects | <input type="checkbox"/> 345 First Aid & Safety Equip. & Supplies (Except Nuclear & Welding) |
| <input type="checkbox"/> 055 Automobile & Truck Accessories | <input type="checkbox"/> 350 Flags, Flag Poles, Banners & Accessories |
| <input type="checkbox"/> 060 Automobile & Truck Maintenance Items & Replacement Parts | <input type="checkbox"/> 360 Floor Covering, Floor Covering Installation & Removal Equipment
& Supplies |
| <input type="checkbox"/> 065 Automobile Bodies & Special Body Accessories for Trucks
(Except School Buses) | <input type="checkbox"/> 365 Floor Maintenance Machines, Parts & Accessories |
| <input type="checkbox"/> 070 Automotive Major Transportation Equipment | <input type="checkbox"/> 370 Food Processing & Canning Equipment & Supplies |
| <input type="checkbox"/> 075 Automotive Shop Equipment & Supplies | <input type="checkbox"/> 375 Foods, Bakery Products (Not Frozen) |
| <input type="checkbox"/> 080 Badges & Other Identification Equipment & Supplies | <input type="checkbox"/> 380 Foods, Dairy Products, Fresh |
| <input type="checkbox"/> 085 Bags, Bagging, Ties, & Erosion Control Equipment | <input type="checkbox"/> 385 Foods, Freeze-Dried & Frozen, Prepared Ready-to-eat
(Convenience) |
| <input type="checkbox"/> 090 Bakery Equipment, Commercial | <input type="checkbox"/> 390 Foods, Perishable |
| <input type="checkbox"/> 095 Barber & Beauty Shop Equipment & Supplies | <input type="checkbox"/> 393 Foods, Staple, Edible |
| <input type="checkbox"/> 100 Barrels, Drums, Kegs & Containers | <input type="checkbox"/> 395 Forms, Continuous (Computer Paper) & Snap-out; & Binders |
| <input type="checkbox"/> 105 Bearings (Except Wheel Bearings & Seals – See Class 060) | <input type="checkbox"/> 400 Foundry Castings, Equipment & Supplies; & Machine Shop Work |
| <input type="checkbox"/> 110 Belts & Belting: Conveyor, Elevator, Power Transmission & V-Belts | <input type="checkbox"/> 405 Fuel, Oil, Grease, & Lubricants |
| <input type="checkbox"/> 115 Biochemicals, Research | <input type="checkbox"/> 410 Furniture, Hospital – Specialized |
| <input type="checkbox"/> 120 Boats, Motors & Marine & Wildlife Supplies | <input type="checkbox"/> 415 Furniture, Laboratory – Specialized |
| <input type="checkbox"/> 125 Bookbinding Supplies | <input type="checkbox"/> 420 Furniture, Non-office |
| <input type="checkbox"/> 135 Bricks & Other Clay Products, Refractory Materials & Stone Products | <input type="checkbox"/> 425 Furniture, Office |
| <input type="checkbox"/> 140 Broom, Brush & Mop Manufacturing Machinery & Supplies | <input type="checkbox"/> 430 Gases; Hospital, Laboratory & Welding & Equipment (see Class
675 for Fumigant Gases) |
| <input type="checkbox"/> 145 Brushes (Not Otherwise Classified) | <input type="checkbox"/> 435 Germicides, Hospital; & Personal Sanitation Products (For Health
Care Personnel) |
| <input type="checkbox"/> 150 Builder's Supplies | <input type="checkbox"/> 440 Glass & Glazing Supplies |
| <input type="checkbox"/> 155 Building, Fabricated | <input type="checkbox"/> 445 Tools, Hand (Not Otherwise Classified) |
| <input type="checkbox"/> 160 Butcher Shop & Meat Processing Equipment | <input type="checkbox"/> 450 Hardware, Shelf Hardware, & Allied Items |
| <input type="checkbox"/> 165 Cafeteria & Kitchen Equipment, Commercial | <input type="checkbox"/> 460 Hose, All Kinds (Except Automobile, Fire, Paint Sprayer & Welding
(See Class 075 for Garage Exhaust Hose) |
| <input type="checkbox"/> 175 Chemical Laboratory Equipment & Supplies | <input type="checkbox"/> 465 Hospital Equipment – General & Specialized |
| <input type="checkbox"/> 180 Chemical Raw Materials (In Large Quantities Primarily for Janitorial
& Laundry Products Manufacturing) | <input type="checkbox"/> 470 Hospital Equipment- Mobility & Speech Impaired |
| <input type="checkbox"/> 190 Chemicals, Commercial, in Bulk Amounts (Minimum Package Size
– 5 Gallons or 40 Pounds) | <input type="checkbox"/> 475 Hospital Sundries |
| <input type="checkbox"/> 192 Cleaning Compositions & Solvents (Not Otherwise Classified) | <input type="checkbox"/> 485 Janitorial Supplies, General Line |
| <input type="checkbox"/> 193 Clinical Laboratory Reagents & Tests (Blood Grouping, Diagnostic,
Drug Monitoring, Etc.) | <input type="checkbox"/> 490 Laboratory Equipment & Accessories (For General, Analytical &
Research Use): Nuclear, Optical & Physical |
| <input type="checkbox"/> 195 Clocks, Timers, Watches & Jewelers' & Watchmakers' Tools &
Equipment | <input type="checkbox"/> 493 Laboratory Equipment & Accessories: Biochemical, Chemistry,
Environmental Science, Etc. |
| <input type="checkbox"/> 200 Clothing & Apparel | <input type="checkbox"/> 495 Laboratory & Field Equipment & Supplies: Biology, Botany,
Geology, Microbiology, Zoology, Etc. |
| <input type="checkbox"/> 205 Computers, Data Processing & Word Processing Systems &
Accessories | <input type="checkbox"/> 500 Laundry & Dry Cleaning Equipment, Commercial |
| <input type="checkbox"/> 210 Concrete & Corrugated Metal Culverts, Pipes & Other Products | <input type="checkbox"/> 505 Laundry & Dry Cleaning Supplies |
| <input type="checkbox"/> 220 Controlling, Indication & Recording Instruments & Supplies | <input type="checkbox"/> 510 Laundry Textiles & Supplies |
| <input type="checkbox"/> 225 Coolers, Drinking Water | <input type="checkbox"/> 515 Lawn Equipment (See Class 020 for Large Tractor Crop Mowers,
Pasture Shredders & Fertilizer Distributors |
| <input type="checkbox"/> 232 Crafts, General | <input type="checkbox"/> 520 Leather, Shoe Findings, Harness & Saddles |
| <input type="checkbox"/> 233 Crafts, Specialized | <input type="checkbox"/> 525 Library Machines & Supplies (Not Furniture – Class 420 or Binding
Materials – Class 125 |
| <input type="checkbox"/> 240 Cutlery, Dishes, Flatware, Glassware, Trays, Utensils & Supplies | <input type="checkbox"/> 530 Luggage, Brief Cases, Purses & Wallets |
| <input type="checkbox"/> 245 Dairy Equipment & Supplies | <input type="checkbox"/> 540 Lumbers, Plywoods, Pressboards, Sheetrock, Shingles, Sidings &
Stakes |
| <input type="checkbox"/> 250 Data Processing Cards & Paper | <input type="checkbox"/> 545 Machinery & Heavy Hardware |
| <input type="checkbox"/> 255 Decalcomanias | <input type="checkbox"/> 550 Markers, Plaques, Signs & Traffic Control Devices |
| <input type="checkbox"/> 260 Dental Equipment Supplies | <input type="checkbox"/> 555 Marking Devices |
| <input type="checkbox"/> 265 Draperies, Curtains & Upholstery Material (Including Automobile) | <input type="checkbox"/> 560 Material Handling Equipment & Allied Items (See Class 850 for
Quilted Covers & Pads for Furniture, Appliances, Etc.) |
| <input type="checkbox"/> 270 Drugs, Pharmaceuticals & Biologicals (For Human Therapeutic Use) | |
| <input type="checkbox"/> 271 Drugs, Pharmaceuticals & Sets (For Large Volume Parenteral
Administration, Infusion, Irrigation & Tube Feeding) | |
| <input type="checkbox"/> 280 Electrical Cables & Wires (Not Electronic) | |
| <input type="checkbox"/> 285 Electrical Equipment & Supplies (Except Cable & Wire) | |
| <input type="checkbox"/> 287 Electronic Components, Replacement Parts & Accessories & Misc.
Electronic Equipment (Not for Testing or Analyzing – See 730) | |

Business Name _____

- ___ 565 Mattress Manufacturing Machinery & Supplies
- ___ 570 Metals: Bars, Plates, Rods, Sheets, Strips, Structural Shapes, Tubing & Fabricated Items
- ___ 575 Microfiche, Microfilm, Microfilming Equipment & Supplies
- ___ 578 Miscellaneous Products
- ___ 580 Musical Instruments & Supplies
- ___ 590 Notions & Sewing Supplies, All Kinds
- ___ 595 Nursery Stock, Equipment & Supplies
- ___ 600 Office Machines, Equipment & Accessories
- ___ 605 Office Mechanical Aids, Small Machines & Apparatus
- ___ 610 Office Supplies: Carbon Paper & Ribbons, All Types
- ___ 615 Office Supplies (Not Otherwise Classified)
- ___ 620 Office Supplies: Erasers, Inks, Leads, Pens, Pencils, Etc.
- ___ 625 Optical Equipment & Supplies
- ___ 630 Paint, Protective Coatings, Varnish, Wallpaper, & Related Products
- ___ 635 Painting Equipment & Accessories
- ___ 640 Paper & Plastic Products, Disposable
- ___ 645 Paper (For Office & Print Shop Use)
- ___ 650 Park, Playground & Swimming Pool Equipment
- ___ 655 Photographic Equipment & Supplies (Not Including Graphic Arts, Microfilm & X-ray)
- ___ 660 Pipes, Snuff & Tobacco
- ___ 665 Plastics (Not Dishes) & Forming, Laminating & Molding Equipment
- ___ 670 Plumbing Equipment Fixtures and Supplies
- ___ 675 Poisons: Agricultural & Industrial
- ___ 680 Police Equipment & Supplies
- ___ 685 Poultry Equipment & Supplies
- ___ 695 Printing & Silk Screening
- ___ 700 Printing Plant Equipment & Supplies (Except Papers)
- ___ 705 Printing Preparations: Etching, Photoengraving, Typesetting & Preparing Mats, Negatives and Plates
- ___ 710 Prosthetic Devices, Hearing Aids, Auditory Testing Equipment, Electronic Reading Devices Etc.
- ___ 715 Publications & Audiovisual Materials (Prepared Materials Only; Not Equipment, Supplies or Production)
- ___ 720 Pumps & Pump Accessories (Except Air & Gas, Automotive Fuel & Water, Hospital, Laboratory, Marine Bailing & Bilge, Refrigerant, Etc.)
- ___ 725 Radio & Telecommunications Equipment & Accessories
- ___ 730 Radio, Television & Electronic Testing, Measuring & Analyzing Equipment & Accessories (Also See Class 840)
- ___ 735 Rags, Shop Towels & Wiping Cloths
- ___ 740 Refrigeration Equipment & Accessories
- ___ 745 Road & Highway Building Materials (Asphaltic)
- ___ 750 Road & Highway Building Materials (Not Asphaltic)
- ___ 755 Road & Highway Equipment & Parts: Asphalt & Concrete Handling & Processing
- ___ 760 Road & Highway Equipment: Earth Handling – Grading, Moving, Packing, Etc.
- ___ 765 Road & Highway Equipment (Except Asphalt, Concrete & Earth Handling Equipment in Class 755 and 760)
- ___ 770 Roofing (Except Wood – See Class 540)
- ___ 775 Salt (Sodium Chloride) (Except Table – See Class 275)
- ___ 780 Scales & Weighing Apparatus (See 175 for Laboratory Balance)
- ___ 785 School & Higher Education Equipment & Supplies
- ___ 790 Seed, Sod, Soil & Inoculants
- ___ 795 Sewing Room & Textile Machinery & Accessories
- ___ 800 Shoes & Boots
- ___ 803 Sound Systems, Components & Accessories: Group Intercom, Music, Public Address, Etc.
- ___ 805 Sporting & Athletic Goods
- ___ 810 Spraying Equipment (Except Household, Nursery Plant & Paint)
- ___ 815 Steam & Hot Water Specialties, Accessories & Supplies
- ___ 820 Steam Boilers, Steam Heating & Power Plant Equipment
- ___ 825 Stockman Equipment & Supplies
- ___ 830 Tanks (Metal, Wood & Synthetic Materials): Mobile, Portable & Stationary
- ___ 832 Tape (Not Data Processing, Measuring, Optical, Sewing, Sound or Video)
- ___ 840 Television Equipment & Accessories
- ___ 845 Testing Apparatus & Instruments (Not for Electrical or Electronic Measurements)
- ___ 850 Textiles, Fibers, Household Linens & Piece Goods
- ___ 855 Theatrical Equipment & Supplies
- ___ 860 Tickets, Coupon Books, Sales Books, Script Books, Etc.
- ___ 863 Tires & Tubes
- ___ 865 Twine
- ___ 870 Venetian Blinds, Awnings & Shades
- ___ 875 Veterinary Equipment & Supplies
- ___ 880 Visual Education Equipment & Supplies (Except Projection Lamps - See Class 285)
- ___ 885 Water Treating Chemicals
- ___ 890 Water Supply & Sewage Treatment Equipment (Not for Air Conditioning, Steam Boiler or Laboratory Reagent Water)
- ___ 895 Welding Equipment & Supplies
- ___ 898 X-Ray & Other Radiological Equipment & Supplies (Medical)
- ___ 905 Aircraft Operations
- ___ 906 Architect-Engineer & Other Professional Design Services (For Construction Coverage, See Public Works – Class 955)
- ___ 908 Bookbinding, Rebinding & Repairing
- ___ 910 Building Maintenance & Repair Services
- ___ 915 Communications & Media Related Services
- ___ 920 Data Processing Services & Software – Purchase Only
- ___ 924 Educational Services
- ___ 925 Equipment Maintenance, Repair & Reconditioning Services
- ___ 930 Equipment Rental Services
- ___ 932 Financial Services
- ___ 935 Health Related Services (Not Including Human Services)
- ___ 937 Human Services
- ___ 940 Laundry & Dry Cleaning Services
- ___ 945 Library Services (Excluding Class 908 – Bookbinding, Rebinding, & Repairing)
- ___ 947 Miscellaneous Services
- ___ 950 Personnel, Temporary (Not Services)
- ___ 955 Public Works & Related Services
- ___ 958 Real Property, Rental or Lease
- ___ 960 Roadside, Grounds & Park Area Services
- ___ 965 Security, Fire & Safety Services
- ___ 966 Bar Coding Equipment & Supplies

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