**20-047 BUSINESS PROPOSAL**

**ATTACHMENT B**

**Instructions: Please provide answers in the shaded areas to all questions. Reference all attachments in the shaded area.**

***Business Proposal***

* + 1. **General (optional) -** Please introduce or summarize any information the Respondent deems relevant or important to the State’s successful acquisition of the products and/or services requested in this RFS.

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* + 1. **Respondent’s Company Structure** - Please include in this section the legal form of the Respondent’s business organization, the state in which formed (accompanied by a certificate of authority), the types of business ventures in which the organization is involved, and a chart of the organization. If the organization includes more than one (1) product division, the division responsible for the development and marketing of the requested products and/or services in the United States must be described in more detail than other components of the organization. Please enter your response below and indicate if any attachments are included.

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* + 1. **Company Financial Information** - This section must include documents to demonstrate the Respondent’s financial stability. Examples of acceptable documents include: most recent Dunn & Bradstreet Business Report (preferred) or audited financial statements for the two (2) most recently completed fiscal years. If neither of these can be provided, explain why and include an income statement and balance sheet, for each of the two most recently completed fiscal years.

If the documents being provided by the Respondent are those of a parent or holding company, additional information should be provided for the entity/organization directly responding to this RFS. That additional information should explain the business relationship between the entities and demonstrate the financial stability of the entity/organization which is directly responding to this RFS.

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* + 1. **Integrity of Company Structure and Financial Reporting** - This section must include a statement indicating that the CEO and/or CFO, of the responding entity/organization, has taken personal responsibility for the thoroughness and correctness of any/all financial information supplied with this proposal. The particular areas of interest to the State in considering corporate responsibility include the following items: separation of audit functions from corporate boards and board members, if any, the manner in which the organization assures board integrity, and the separation of audit functions and consulting services. The State will consider the information offered in this section to determine the responsibility of the Respondent under IC 5-22-16-1(d).

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* + 1. **Contract Terms/Clauses** - A sample contract (Attachment A) and sample CCDF Agreement Center / CCDF Intake Agent MOU (Attachment G) are provided with this RFS. All clauses in the Attachment G CCDF Agreement Center / CCDF Intake Agent MOU are mandatory and are non-negotiable. Mandatory clauses in the Attachment A sample contract listed in RFS Section 2.3.5 are non-negotiable. Please indicate your acceptance of the mandatory clauses and the non-mandatory contract clauses in the sample contract (Attachment A) and the sample MOU (Attachment G). If a non-mandatory clause is not acceptable as worded, suggest specific alternative wording to address issues raised by the specific clause. If you require additional contract terms please include them in this section.

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* + 1. **References** - The State requests two (2) references from Respondents for this RFS. Reference information is captured in Attachment E. Respondent should complete the reference information portion of Attachment E, which includes the name and address of the reference and the name, title, and phone/fax numbers of a person from the reference who may be contacted for further information if the State elects to do so. The rest of Attachment E should be completed by the reference and either mailed or emailed DIRECTLY to the State. The State should receive one (1) copy of Attachment E from each of the two (2) references. Attachment E should be submitted to [idoareferences@idoa.in.gov](mailto:idoareferences@idoa.in.gov) or mailed to the address listed in Section 1.8 of the RFS. Attachment E should be submitted no more than ten (10) business days after the proposal submission due date listed in Section 1.24 of the RFS. Please provide the information for each reference below.

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| **Reference 1** |  |
| Reference Name |  |
| Mailing Address |  |
| City, State, Zip |  |
| Company Website Address (if applicable) |  |
| Contact Person |  |
| Contact Title |  |
| Contact Telephone Number |  |
| Contact Fax Number |  |
| Contact E-mail |  |
| Industry of Company (if applicable) |  |
| **Reference 2** |  |
| Reference Name |  |
| Mailing Address |  |
| City, State, Zip |  |
| Company Website Address (if applicable) |  |
| Contact Person |  |
| Contact Title |  |
| Contact Telephone Number |  |
| Contact Fax Number |  |
| Contact E-mail |  |
| Industry of Company (if applicable) |  |

**2.3.7 Registration to do Business -** Selected out-of-state Respondents providing the products and/or services required by this RFS must be registered to do business within the State by the Indiana Secretary of State and the Indiana Department of Administration, Procurement Division. The address contact information for this office may be found in Section 1.18 of the RFS. This process must be concluded prior to contract negotiations with the State. It is the successful Respondent’s responsibility to complete the required registration with the Secretary of State. Please indicate the status of registration, if applicable. Please clearly state if you are registered and if not provide an explanation.

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* + 1. **Authorizing Document -** Respondent personnel signing the Transmittal Letter of the proposal must be legally authorized by the organization to commit the organization contractually. This section shall contain proof of such authority. A copy of corporate bylaws or a corporate resolution adopted by the board of directors indicating this authority will fulfill this requirement. Please enter your response below and indicate if any attachments are included.

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* + 1. **Subcontractors -** The Respondent is responsible for the performance of any obligations that may result from this RFS, and shall not be relieved by the non-performance of any subcontractor. Any Respondent’s proposal must identify all subcontractors and describe the contractual relationship between the Respondent and each subcontractor. Either a copy of the executed subcontract or a letter of agreement over the official signature of the firms involved must accompany each proposal.  
         
       Any subcontracts entered into by the Respondent must be in compliance with all State statutes, and will be subject to the provisions thereof. For each portion of the proposed products and services to be provided by a subcontractor, the technical proposal must include the identification of the functions to be provided by the subcontractor and the subcontractor’s related qualifications and experience. The combined qualifications and experience of the Respondent and any or all subcontractors will be considered in the State’s evaluation. The Respondent must furnish information to the State as to the amount of the subcontract, the qualifications of the subcontractor for guaranteeing performance, and any other data that may be required by the State. All subcontracts held by the Respondent must be made available upon request for inspection and examination by appropriate State officials, and such relationships must meet with the approval of the State.  
         
       The Respondent must list any subcontractor’s name, address, and the state in which formed that are proposed to be used in providing the required products and/or services. The subcontractor’s responsibilities under the proposal, anticipated dollar amount for subcontract, form of organization, and an indication from the subcontractor of a willingness to carry out these responsibilities are to be included for each subcontractor. This assurance in no way relieves the Respondent of any responsibilities in responding to this RFS or in completing the commitments documented in the proposal.

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* + 1. **Reserved**
    2. **General Information** - Each Respondent must enter your company’s general information including contact information.

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| **Business Information** |  |
| Legal Name of Company |  |
| Contact Name |  |
| Contact Title |  |
| Contact E-mail Address |  |
| Company Mailing Address |  |
| Company City, State, Zip |  |
| Company Telephone Number |  |
| Company Fax Number |  |
| Company Website Address |  |
| Federal Tax Identification Number (FTIN) |  |
| Number of Employees (company) |  |
| Years of Experience |  |
| Number of U.S. Offices |  |
| Year Indiana Office Established (if applicable) |  |
| Parent Company (if applicable) |  |
| Revenues ($MM, previous year) |  |
| Revenues ($MM, 2 years prior) |  |
| % Of Revenue from Indiana customers |  |

* 1. Does your Company have a formal disaster recovery plan? Please provide a yes/no response. If no, please provide an explanation of any alternative solution your company has to offer. If yes, please note and include as an attachment.

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* 1. What is your company’s technology and process for securing any State information that is maintained within your company?

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* + 1. **Experience Serving State Governments -** Please provide a brief description of your company’s experience in serving state governments and/or quasi-governmental accounts.

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* + 1. **Experience Serving Similar Clients -** Please describe your company’s experience in serving customers of a similar size to the State with similar scope. Please provide specific clients and detailed examples.

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