**RFP 22-71967 VENDING MACHINES**

**ATTACHMENT E BUSINESS PROPOSAL**

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

***Business Proposal***

* + 1. **General -** 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 RFP.

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| Shaffer Distributing Company is the current provider of vending equipment to the State of Indiana’s BVIS program. Shaffer has been providing vending equipment and related services to the program since the acquisition of J&J distributing in 1998. |

* + 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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| Shaffer Distributing Company is an Ohio corporation headquartered in Columbus, Ohio with branch offices in Cleveland, Detroit and Indianapolis, Indiana.  The company was founded in 1929 and currently has two divisions:  Distribution - The distribution division, doing business as Shaffer Distributing, sells vending equipment, parts and services to various business entities throughout the greater Midwest. The company also sells arcade equipment to a diverse group of business entities through the greater United States. Shaffer represents all major brands of vending equipment as well as virtually every arcade manufacturer.  Route – The route division, doing business as Shaffer Entertainment, operates arcade equipment, digital juke boxes and ATMs at various business establishments throughout the states of Ohio, Indiana Kentucky, Michigan and west Virginia.  Please refer to supporting documents folder for the Certificate of Authority and Org Chart documents. |

* + 1. **Respondent’s Diversity, Equity and Inclusion Information -** With the Cabinet appointment of a Chief Equity, Inclusion and Opportunity Officer, on February 1, 2021, the State of Indiana sought to highlight the importance of this issue to the state. Please share leadership plans or efforts to measure and prioritize diversity, equity, and inclusion. Also, what is the demographic compositions of Respondents’ Executive Staff and Board Members, if applicable.

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| Shaffer has embraced and continues to embrace a non-discriminatory hiring policy and currently employs a diverse group of individuals. A formal diversity and inclusion plan is currently being reviewed by Shaffer’s HR department. Current executive staff members are male and Caucasian. |

* + 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 RFP. 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 RFP.**

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| Please refer to the supporting documents folder for the last two years financial statements. |

* + 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 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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| *I have read and take responsibility for the financial information provided with this proposal. Our financial statements have been prepared in accordance with generally accepted accounting principles and are reviewed on an annual basis by our independent accounting firm, Crowe LLP, as stated in their Review Opinion which is included with our financial statements.*  *Kelly Norton, CFO* |

* + 1. **Contract Terms/Clauses** - Please provide the requested information in RFP Section 2.3.6. Additional rows may be added if necessary.

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| **Contract Term**  **Identifier and Header** | **Suggested Language Change** | **Rationale for suggested change** |
| 19. Employment Options | Strike in its entirety | Conflict of interest |
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* + 1. **References** - Reference information is captured on **Attachment H** Respondent should complete the reference information portion of the **Attachment H** which includes the name, address, and telephone number of the client facility and the name, title, and phone/fax numbers of a person who may be contacted for further information if the State elects to do so. The rest of **Attachment H** should be completed by the reference and **emailed DIRECTLY** to the State. The State should receive three (3) **Attachment Hs** from clients for whom the Respondent has provided products and/or services that are the same or similar to those products and/or services requested in this RFP. **Attachment H** should be submitted to [idoareferences@idoa.in.gov](mailto:idoareferences@idoa.in.gov). **Attachment H** is due on the date listed in Section 1.24 of the RFP. Please provide the customer information for each reference.

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| **Customer 1** |  |
| Legal Name of Company or Governmental Entity | Opportunities for Ohioans with Disabilities |
| Company Mailing Address | 400 E Campus View Blvd |
| Company City, State, Zip | Columbus, OH 43235 |
| Company Website Address | OOD.Ohio.Gov |
| Contact Person | Sally Nunes |
| Contact Title | Manager |
| Company Telephone Number | (614) 781-8791 |
| Company Fax Number |  |
| Contact E-mail | Sally.nunes@ood.ohio.gov |
| Industry of Company |  |
| **Customer 2** |  |
| Legal Name of Company or Governmental Entity | Sheehan Vending |
| Company Mailing Address | 1740 Commerce Rd |
| Company City, State, Zip | Springfield, OH 45505 |
| Company Website Address | www.sheehanvending.com |
| Contact Person | Matt Ryan |
| Contact Title | General Manager |
| Company Telephone Number | (937) 325-2357 |
| Company Fax Number |  |
| Contact E-mail | MRyan@SheehanVending.com |
| Industry of Company | Vending Operator |
| **Customer 3** |  |
| Legal Name of Company or Governmental Entity | Mulders Vending |
| Company Mailing Address | 2131 Kalamazoo Ave SE |
| Company City, State, Zip | Grand Rapids, MI 49507 |
| Company Website Address | www.muldersvending.com |
| Contact Person | Tom Niederer |
| Contact Title | Owner |
| Company Telephone Number | (616) 245-3470 |
| Company Fax Number |  |
| Contact E-mail | T.Niederer@MuldersVending.com |
| Industry of Company | Vending Operator |

* + 1. **Registration to do Business** – Per RFP 2.3.8,Respondents providing the products and/or services required by this RFP must be registered to do business by the Indiana Secretary of State. The Secretary of State contact information may be found in Section 1.18 of the RFP. 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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| Shaffer is registered and in good standing with the Office of Indiana Secretary of State |

* + 1. **Authorizing Document -** Respondent personnel signing the Executive Summary 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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| Please refer to Directors’ Minute of Action statement in supporting documents folder |

* + 1. **Diversity Subcontractor Agreements** -

1. Per RFP Section 1.21, Minority & Women’s Business Enterprises (MBE/WBE), and 1.22 Indiana Veteran Owned Small Business Subcontractor (IVOSB), explain process followed to engage with potential MBE, WBE and IVOSB owned, Indiana certified businesses listed on Division of Supplier Diversity site. List the businesses invited to discuss the opportunity for potential partnership.

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1. If not proposing each MBE, WBE or IVOSB subcontractor partnership, explain the rationale for declining to do so. Complete this for each category not proposed.

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| No subcontractors required to fulfil this RFP |

* + 1. **Evidence of Financial Responsibility** – Removed at the request of the agency.
    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 | Shaffer Distributing Company |
| Contact Name | Charles Ropke |
| Contact Title | COO |
| Contact E-mail Address | cropke@shafferdistributing.com |
| Company Mailing Address | 1100 W 3rd Ave |
| Company City, State, Zip | Columbus, OH 43212 |
| Company Telephone Number | Toll-Free: (800) 282-0194 / Direct: (614) 421-6800 |
| Company Fax Number | NA |
| Company Website Address | www.shafferdistributing.com |
| Federal Tax Identification Number (FTIN) | 314304446 |
| Number of Employees (company) | 66 |
| Years of Experience | 93 |
| Number of U.S. Offices | 4 |
| Year Indiana Office Established (if applicable) | 1998 |
| Parent Company (if applicable) |  |
| Revenues ($MM, previous year) | 26,884,404 |
| Revenues ($MM, 2 years prior) | 18,187,596 |
| % Of Revenue from Indiana customers | 14% |

* 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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| No, however all accounting data is backed up internally and externally on a daily basis. The company has facility redundancy by having 4 offices throughout the Midwest. |

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

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| **Private network managed by 3rd party vendor. Production network isolated for Guest and BYOD networks. Fortinet firewalls deployed. Antivirus installed on server and all PCs. All PCs updated to windows 10 (minimum) using latest version of Microsoft. Sate information accessible only to those needing access.** |

* + 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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| Shafer has a history of providing vending equipment and related services to various state agencies including Ohio, Indiana, Kentucky and West Virginia, for over 50 years. |

* + 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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| Shaffer is the current provider of vending equipment and related services to the State of Ohio OOD program. The current agreement includes field service, equipment refurbishment, storage and relocation throughout the entire state of Ohio. |

* + 1. **Payment -** Please provide the requested information in RFP Section 2.3.15.

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| Because of smaller gross margins, Shaffer cannot absorb credit card processing fees. Therefore, the company declines payment using credit cards by the State of Indiana. |

* + 1. **Extending Pricing to Other Governmental Bodies** – Indicate your willingness to extend prices of awarded products and/or services to other governmental bodies per RFP section 2.3.17. Please include details on any marketing or active solicitation activities your company will undertake to encourage use of the contract.

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| We encourage other state agencies to purchase products on this RFP. Currently, the state prison system purchases microwave ovens using the current RFP. |