**RFS 25-80876**

**ATTESTATION FORM**

**ATTACHMENT G**

***Respondent Name:***

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| ***Indiana Addictions Issues Coalition of Mental Health America of Indiana*** |

1. **Mandatory Submissions and Requirements**: Disagreement with these items may result in the response being disqualified.

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| Attachment G: Attestation Form | X Have completed in its entirety and submitted |
| Section 2.2 Executive Summary | X Have completed, signed, and submitted |
| Section 2.3 Attachment C: Business Proposal | X Have completed and submitted |
| Section 2.4 Attachment D: Technical Proposal | X Have completed and submitted |
| Section 2.5 Attachment E: Cost Proposal | X Have completed and submitted |

1. **Confirm mutual understanding and submission.**

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| --- | --- |
| 1.12 and 2.1 Confidential Information:  The complete list of Confidential and Redacted files is specified in section 3.0 of this attachment. | ☐ Have read, and submitted  or  X Have read, and does not apply to response |
| 2.2.1 Ability and Desire to Supply the Required Products or Services | X Have read, and agree |
| 2.3.1 Contract Terms/Clauses | X Confirm Respondent's Legal Representation has read and accepts Sample Contract language.  or  ☐ Confirm Respondent’s Legal Representation has read, and submitted alternative language per Attachment C. |

1. **Confidential / Redacted File: confirm submission if applicable**

More rows may be inserted if necessary

Responses must include the following required information:

* List all documents or sections of documents, for which statutory exemption to APRA;
* Specify which statutory exception of APRA applies for each document or section of the document;
* Provide a description explaining how the statutory exception to the APRA applies for each document or section of the document; and
* Provide a separate redacted or confidential, whichever is applicable, version of the document. File name should use the following format:
* (RFS 25-80876) \_ (insert Att letter) \_CONFIDENTIAL
* (RFS 25-80876) \_ (insert Att letter) \_REDACTED
* More rows may be inserted if necessary

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| --- | --- | --- | --- | --- | --- |
| **Filename** | **Document Section** | **Document**  **Page #** | **Statutory exception reference** | **Rationale for application of the statute** | **Submitted** |
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1. **Respondent additional attachments (OPTIONAL)**

More rows may be inserted if necessary

|  |  |
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| **Filename** | **RFS Attachment Reference** |
| MHAI Bylaws amended 2023 | Attachment C section 2.3.3 MHAI By-laws and Financial Policy- authorizing document |
| Nonprofit status document | Attachment C section 2.3.2 registration with Secretary of State |
| IAIC\_RCO\_Certification6.1.23 | Attachment A Scope of work requirements section 3a |
| LOS SSAS\_IAIC RRH 2024 | Attachment D Partnership Letter of support section 8c |
| IDOA DMHA RFS LOS MCPO8.20.24 | Attachment D Partnership Letter of support section 8b |
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