

**HILLSBOROUGH COUNTY
SHERIFF'S OFFICE**



CHAD CHRONISTER, SHERIFF

Invitation to Bid No. 2022-017

Presumptive Drug Test Kits

January 3, 2023

HILLSBOROUGH COUNTY SHERIFF'S OFFICE



CHAD CHRONISTER, SHERIFF

Hillsborough County Sheriff's Office
Sheriff's Operation Center
Financial Services Division - Purchasing Section
2008 East 8th Avenue
Tampa, FL 33605

Donna Farnham, Buyer
(813) 247-8948
DFarnham@TeamHCSO.com

INSTRUCTIONS TO BIDDERS

Included herein are General Terms and Conditions (Part A), Special Provisions (Part B), Specifications (Part C) and Bid Response (Part D), which together with all attachments, constitute the entire "Bid Package". Said Bid Package must be the basis upon which all bids are offered and must be kept together and returned, intact, by the time and at the place specified herein. The Bidder must manually sign the General Terms and Conditions (Part A) and Bid Response (Part D). Any questions concerning this Invitation to Bid (Bid) should be directed to the Buyer whose name appears above.

When awarded, the Bid Package becomes the "**Contract Document**". The Bidder's signature on the Bid Response (Part D), constitutes Bidder's agreement to the terms therein. The signature on the Bid Package must be that of an Officer of the Company, or an individual authorized to commit the Company to a legal and binding Contract. **READ THE ENTIRE BID PACKAGE CAREFULLY BEFORE SIGNING.**

NOTICE TO BIDDERS

WHEN SUBMITTING A SEALED BID PACKAGE, CLEARLY MARK THE PACKAGE AS A BID DOCUMENT ON THE OUTSIDE OF THE ENVELOPE OR BOX. INCLUDE THE BID NUMBER AND THE DATE AND TIME OF THE BID OPENING.

TABLE OF CONTENTS	PAGE
Instructions to Bidders	2
DATE, TIME, AND PLACE	4
Part A - General Terms and Conditions	5
SIGNATURE OF ACKNOWLEDGMENT	10
Part B - Special Provisions	11
Part C - Specifications	17
Part D – Bid Response	18
SIGNATURE OF AFFIRMATION	21
REFERENCES	22
Statement of No Bid	23
Bid Checklist	24
Package Label	25
Appendix I - Supplier Packet (Application, W9, Direct Deposit)	Attached
Appendix II – Pricing Matrix	Attached

PROPOSED SCHEDULE OF EVENTS	DATE
BID ADVERTISED / POSTED TO HCSO AND OSD WEBSITES	1/11/2023
DEADLINE TO SUBMIT QUESTIONS TO PURCHASING	1/18/2023
DEADLINE TO SUBMIT BID	1/31/2023
AWARD NOTIFICATION TARGET DATE	2/8/2023

**HILLSBOROUGH COUNTY SHERIFF'S OFFICE
2008 E. 8th Avenue
Tampa, Florida 33605**

SUBJECT: INVITATION TO BID 2022-017

BID TITLE: Presumptive Drug Test Kits

OPENING DATE & TIME: JANUARY 31, 2023 @ 3:00 PM

PLACE: Hillsborough County Sheriff's Office
Sheriff's Operation Center
Financial Services Division - Purchasing Section
2008 E. 8th Avenue
Tampa, FL 33605
Recorded – No Attendees Present

The Bid opening will *not* be open to the public. Bids will be received until the time and date shown and will be read aloud immediately thereafter at the "Place" indicated. A video recording of the Bid opening will then be posted to the HCSO website <https://TeamHCSO.com>.

BID OVERVIEW: The purpose of this Invitation to Bid 2022-017 is to describe the requirements of Chad Chronister, the Sheriff of Hillsborough County, a Constitutional Officer of the State of Florida as Sheriff, to secure a supplier for the procurement of Presumptive Drug Test Kits.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

PART A - GENERAL TERMS AND CONDITIONS

1. **BIDS:** Must be contained in a SEALED envelope addressed to: Hillsborough County Sheriff's Office, Sheriff's Operations Center, Financial Services Division – Purchasing Section, 2008 East 8th Avenue, Tampa, Florida 33605. To prevent inadvertent opening, the Bid must be marked as a BID DOCUMENT (including the Bid number, date, and time of Bid opening) on the outside of the package.

If our specifications, when included, are not returned with your Bid, and no specific reference is made to them in your BID RESPONSE (PART D), it will be assumed that all specifications will be met. When material, sketches, cuts, descriptive literature, company's or manufacturer's specifications which accompany the BID RESPONSE (PART D), contain information that can be construed or is intended to be a deviation from our specifications, such deviation must be specifically referenced in your BID RESPONSE, *Exceptions* (PART D, Paragraph 1).

2. **BID DELIVERY:** The responsibility for getting the Bid to the HCSO on or before the stated time and date will be solely and strictly the responsibility of the Bidder. The HCSO will in no way be responsible for delays caused by the United States Postal Service or a delay caused by any other occurrence, or any other method of delivery. The Bidder shall be responsible for reading very carefully and understanding completely the requirements in the specifications. Bids will not be accepted after the time specified for receipt.
3. **ON-LINE DOCUMENTS:** The HCSO publishes procurement-related documents on its website at <https://TeamHCSO.com/Purchasing> for the convenience of companies wanting to do business with the HCSO and to save tax dollars. This service is public record and the HCSO is responsible only for documents as published. Any modifications or alterations to the original document language may be cause for rejection of a bid.
4. **TIME FOR CONSIDERATION:** Bidder warrants, by virtue of bidding, the prices quoted in their response will be good for an evaluation period of 60 calendar days from the date of bid opening unless otherwise stated. Bidders will not be allowed to withdraw or modify their Bids after the opening time and date.
5. **PRICES:** All bids submitted must show the net bid price after any and all discounts allowable have been deducted. **Prices quoted are to be F.O.B. Destination.** All prices shall include freight (to include manufacturer to distributor), packaging, and any other similar fees. The HCSO is exempt from all state sales, use, transportation, and excise taxes. The HCSO will issue tax exemption certificates to the Awarded Supplier.

The Bidder's attention is directed to the laws of the State of Florida including, but not limited to, Chapter 212, Florida Statutes, which applies to all transactions resulting from this Bid, and that all applicable taxes and fees shall be deemed to have been included in the BID RESPONSE (PART D) as part of the materials cost, when applicable.

6. **BID ERRORS:** When errors are found in the extension of bid prices, the unit price will govern. Bids having erasures or corrections must be initialed in ink by the Bidder.

7. CONDITION OF MATERIALS AND PACKAGING: Unless otherwise indicated, it is understood and agreed that any commodity offered or shipped on this Bid shall be NEW and in FIRST CLASS CONDITION or FIRST QUALITY, that all containers shall be NEW and suitable for storage or shipment, and that prices include standard commercial packaging for the items shipped.
8. CLAIMS: The Awarded Supplier will immediately replace missing or damaged items and will be responsible for making any and all claims against carriers.
9. WHEN TO MAKE DELIVERY: Deliveries resulting from this Bid are to be made during the normal working hours of the HCSO. It is the Bidder's responsibility to obtain this information.
10. INFORMATION AND DESCRIPTIVE LITERATURE: Bidders must furnish all information requested in the Bid. If specified, each Bidder must submit samples, cuts, sketches, descriptive literature, and/or complete specifications covering the products offered. Reference to literature submitted with previous responses will not satisfy this provision. Bids which do not comply with these requirements will be subject to rejection.
11. BID SUBMITTAL COSTS: Submittal of a Bid is solely at the cost of the Bidder and the HCSO in no way is liable or obligates itself for any cost incurred by the Bidder in preparing the Bid Package.
12. NO BID: If you do not wish to submit a response to the Bid, please return the STATEMENT OF NO BID contained herein. The "No Bid" information is helpful to the process and assures the HCSO you wish to remain on the HCSO Supplier List.
13. COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH ACT (OSHA): The Bidder certifies that all material/items contained in their response meets all OSHA requirements.
14. LAWS, STATUTES, AND ORDINANCES: The terms and conditions of the Bid and the resulting Agreement shall be construed in accordance with the laws and statutes of the state of Florida and ordinances and other regulations of Hillsborough County. Where such statutes and regulations are referenced, they shall be interpreted to apply to this Bid and to the resulting Agreement. While the Sheriff is not bound by Chapter 287, *Florida Statutes*, in the spirit of fair dealing and just opportunity, the HCSO endeavors to meet the directives and business practices articulated in the Chapter.

The Bidder's attention is directed to the fact that all applicable Federal, State and local laws, ordinances, codes, rules and regulations shall apply to the contract throughout and they will be deemed to be included in the contract the same as though herein written. Florida law will govern all questions concerning implementation and execution of this contract and shall also be controlling in any cause of action brought pursuant to this contract.

The Awarded Supplier agrees that it shall observe and obey all the laws, ordinances, regulations, and rules of the Federal, State, County and City which may be applicable to its services.

15. FAMILIARITY WITH LAW: The Bidder is required to be familiar with all Federal, State and local laws, ordinances, rules, codes and regulations that in any manner affect the work. Ignorance on the part of the Bidder will in no way relieve him from responsibility.
16. ACCEPTANCE AND REJECTION: The HCSO reserves the right to reject any or all bids, for cause, to waive irregularities, if any, and to accept the Bid (or Bids) which, in the judgment of the Sheriff, are in the best interest of the HCSO. The HCSO reserves the right to evaluate, add, and/or reject any items from any bid options or resulting contract(s) when deemed to be in the best interest of the HCSO.
17. APPROPRIATION OF FUNDS: The HCSO, as an entity of local government, is subject to the appropriation of funds by the Hillsborough County Board of County Commissioners in an amount sufficient to allow continuation of its performance in accordance with the terms and conditions of any contract entered into as a result of this Bid for each and every fiscal year following the fiscal year in which this Contract is executed and entered into, and for which the Contract shall remain in effect. The HCSO shall, upon receipt of notice that sufficient funds are not available to continue its full and faithful performance under the Contract, provide prompt written notice of such event and effective 30 calendar days after the giving of such notice, or upon the expiration of the period of time for which funds were appropriated, whichever occurs first, be thereafter released of all further obligations in any way related to such Contract.
18. PROTESTS: Any Bidder who disputes the reasonableness or appropriateness of the notice of award, or notice of rejection, for any or all Bids must submit a notice of protest in writing within 72 hours (excluding HCSO holidays, Saturdays and Sundays) of the notice of award to the HCSO Purchasing Section by registered mail or hand delivery for which a receipt must be provided.
 - A. The HCSO will have five (5) business days upon receipt of the notice to review and consider the protest as written. The Buyer will coordinate the review process with the parties involved and may request additional information from the Bidder or request a meeting to gain further clarification of the issues. Upon completion of this review process, the Buyer will make a recommendation to the Chief Financial Officer (CFO).
 - B. The CFO may concur with the recommendation or arrive at a separate decision. The decision of the CFO will be communicated to the Bidder in writing. This decision, and the basis upon which it was made, will be communicated to the Bidder within five (5) business days following the receipt of the recommendation from the Purchasing Section. A single appeal of the CFO's decision is available by submitting a notice in writing within 72 hours (excluding HCSO holidays, Saturdays and Sundays) requesting a management review of the decision. Final decision of an appeal will be made by the Sheriff.

19. **INDEMNIFICATION:** The Awarded Supplier will indemnify and hold harmless the HCSO and its employees and agents from and against all liabilities, claims, damages, losses, and expenses, including attorney's fees arising out of or resulting from the performance of its Work, provided that any such liability, claim, damage, loss, or expense is (a) attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property (other than the Work itself), including the loss of use resulting there from and (b) is cause in whole, or in part, by the act or omission of the Awarded Supplier, any Subcontractor, anyone directly or indirectly employed by any of them, or anyone for whose acts any of them may be liable, whether or not it is caused in whole, or in part, by a party indemnified hereunder.

In any and all claims against the HCSO or any of its agents or employees by any employee of the Bidder, any Subcontractor, anyone directly or indirectly employed by any of them, or anyone for whose acts any of them may be liable, the indemnification obligation under the previous paragraph shall not be limited in any way as to the amount or type of damages, compensation or benefits payable by or for the Bidder or any Subcontractor under worker's compensation acts, disability benefit acts, or other employee benefit acts.

20. **PUBLIC ENTITY CRIMES:** Pursuant to §§287.132-133, *Fla. Stats.*, the HCSO, as a public entity, may not accept any bid, proposal or reply from, award any contract to, or transact any business in excess of the threshold amount provided in §287.017, *Fla. Stat.*, for Category Two (\$35,000) with any person or affiliate on the convicted Supplier list for a period of 36 months from the date that the person or affiliate was placed on the convicted Supplier list, unless that person or affiliate has been removed from the list pursuant to §287.133 (3)(f), *Fla. Stat.* If you submit a proposal in response to this Bid, you are certifying that §§287.132-.133, *Fla. Stats.*, does not restrict your submission.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

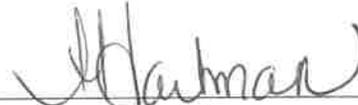
21. **PUBLIC RECORDS:** Any material submitted in response to this Bid will become a public document pursuant to §119.07, *Fla. Stat.* This includes material which the respondent might consider to be confidential or a trade secret. Any claim of confidentiality is waived upon submission, effective after opening pursuant to §119.07, *Fla. Stat.* The Bidder agrees to comply with §119.0701, *Fla. Stat.*, regarding maintenance and provision of access to all public records generated by this Contract with the HCSO.

The HCSO requires that, at the conclusion of the selection process, the contents of all bids be placed in the public domain and be open to inspection by interested parties. Any restrictions on the use of data contained within a bid must be clearly stated in the Bid itself. Proprietary information submitted in response to the Bid will be handled in accordance with applicable *Florida Statutes*.

If the Bidder has questions regarding the application of Chapter 119, Florida Statutes, to the Bidder's duty to provide public records relating to this Contract, contact the custodian of public records at: Hillsborough County Sheriff's Office, Sheriff's Operations Center, ATTN: Records Section, 1900 East 9th Avenue, Tampa, Florida 33605, (813) 247-8210 or at HCSORecords@teamHCSO.com.

Chad Chronister,
Sheriff of Hillsborough County,
A Constitutional Officer of the State of Florida

By: _____


Andrea Hartman
A/Chief Financial Officer

SIGNATURE OF ACKNOWLEDGMENT

The General Terms and Conditions outlined above are acknowledged. Our Bid is attached.

Company Name

Company Officer Name (Printed) Title

Company Officer Signature Date

NOTE: THIS PAGE MUST BE RETURNED WITH YOUR BID. EACH COMPANY’S BID, AND ANY CLARIFICATIONS TO THAT BID, AS WELL AS ALL AMENDMENTS OR ADDENDA TO THIS DOCUMENT SHALL BE SIGNED BY AN OFFICER OF THE COMPANY OR A DESIGNATED AGENT EMPOWERED TO BIND THE COMPANY IN CONTRACT. EXCEPTIONS TO THE SPECIFICATIONS, IF ANY, MAY BE NOTED IN THE BID RESPONSE, *EXCEPTIONS* (PART D, PARAGRAPH 1).

PART B - SPECIAL PROVISIONS

1. **COMMUNICATION BETWEEN PARTIES:** All questions in regard to this Bid are to be directed, in writing, to the Buyer as listed on page 2, *Instructions to Bidders*. No communication is allowed, either directly or indirectly, with any other HCSO employee in regard to this Bid prior to the notice of award.

In the interest of public access, all documents relating to this Bid will be posted to the HCSO website at <https://TeamHCSO.com/Purchasing>. This will include Question & Answer (Q&A), amendments, addenda, etc. Posting documents to the HCSO website is considered the official method of notification regardless of other notification methods the Buyer utilizes for convenience of the parties involved.

2. **THE SUPPLIER PACKET:** The completed APPENDIX I must be returned with your Bid Response along with copies of Hillsborough County Business Tax Receipt, other local government, or state business license(s). Failure to provide requested documentation will cause submission to be deemed unresponsive.
3. **BIDDER QUALIFICATIONS:** Bids shall be considered only from those who can clearly demonstrate to the HCSO a professional ability to perform the type of work specified within the Bid. Bidders must be able to demonstrate adequate organization, financial backing, equipment and personnel to ensure continuous provision of quality service to the HCSO. In the determination of the evidence of responsibility and ability to perform the contract by the Bidder, the HCSO reserves the right to investigate the financial condition, experience and training records, personnel, equipment, facilities and organization of the Bidder. The HCSO shall determine whether the evidence of responsibility and ability to perform is satisfactory, and will make awards only when such evidence is deemed satisfactory. The Sheriff reserves the right to reject a Bid when evidence indicates the inability to perform the work specified within the Bid.
4. **E-VERIFY REQUIREMENT:** Pursuant to §448.095, *Fla. Stat.*, the Sheriff requires the Awarded Supplier, and any and all subcontractors, if permitted by agreement, to register with and use the E-Verify system to verify the work authorization status of all newly hired employees. If the Awarded Supplier enters into a contract with a subcontractor, the subcontractor must provide the Awarded Supplier with an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an unauthorized alien. The Awarded Supplier shall maintain a copy of such affidavit for the duration of the contract. If the Sheriff has a good faith belief that the Awarded Supplier has knowingly violated §448.09(1), *Fla. Stat.*, the contract will be terminated. If the Sheriff has a good faith belief that a subcontractor knowingly violated this subsection, but the Awarded Supplier otherwise complied with this subsection, the Sheriff will promptly notify the Awarded Supplier and order the Awarded Supplier to immediately terminate the contract with the subcontractor. Termination of any and all contracts and/or sub-contracts as provided above, does not constitute a breach of contract and may not be considered as such. If the Sheriff terminates a contract with an Awarded Supplier as provided above, the Awarded Supplier may not be awarded a contract for at least one (1) year after the date on which the contract was terminated. The Awarded Supplier is liable for any additional costs incurred by the Sheriff as a result of the termination of a contract.

5. **SUBCONTRACTING:** The Awarded Supplier may not sublet or subcontract any of the contractual obligations concerning this bid matter except as provided for in the written contract between the HCSO and Awarded Supplier. This statement prohibits subcontracting overall management obligations pertaining to the work and requires the Awarded Supplier to retain ultimate liability for all contractual obligations.
6. **MANUFACTURER'S NAME:** The HCSO will not allow substitutions to the brand name, model number or the configuration of the requested equipment or service unless authorized in writing. All items not specifically mentioned but which are standard factory items shall be included. Manufacturer's specification sheets shall be furnished upon request.
7. **CONFLICT OF INTEREST:** The Bidder agrees to disclose any organizational conflict of interest, perceived or real, for evaluation of HCSO's compliance with §112.313, *Fla. Stat.*, regarding standards of conduct for public officers, employees of agencies, and local government attorneys.

No HCSO employee acting in an official capacity, as a purchasing agent, or public officer, shall either directly or indirectly purchase, rent, or lease any realty, goods, or services for HCSO from any business entity of which the officer, partner, director, or proprietor, or in which such officer or employee or the officer's or employee's spouse or child, or any combination thereof, has a material (>5%) interest. An officer or employee is also prohibited from having an employment or contractual relationship that creates a continuing or recurring conflict between their private interest and the performance of their HCSO public duties.

8. **AWARD:** Award shall be made to the most responsive Bid and responsible Bidder meeting specifications, price and other factors considered to include the evaluation of samples for quality, durability and safety at a minimum. The HCSO reserves the right to award by line item or by overall total, whichever is deemed in the best interest of the HCSO. Award may be made to more than one (1) Bidder.
 - A. Award will be dependent upon the determination that the Bids are responsive, Bidders are responsible, evaluation criteria stated in the Bid document and any other evaluation criteria deemed relevant and beneficial. Bids and Bidders determined to be deficient in either responsiveness or responsibility may be rejected without further evaluation. Tabulation of the Bid prices and Bidder rankings, if applicable, will be published at the time of Award.
 - B. Notification of Award will be sent to the Bidder receiving the Award. Bid results will be published on the HCSO website: <https://TeamHCSO.com/Purchasing>
9. **BID OPENING:** The Bid Opening will *not* be open to the public. Bids will be received until the time and date listed herein and will be read aloud immediately thereafter at the "Place" indicated. A video recording of the Bid opening will then be posted to the HCSO website <https://TeamHCSO.com/Purchasing>.
 - A. Bids must be received by the HCSO Purchasing Section no later than the time and date shown within this Bid document. Bidders mailing their Bid Packages should allow for normal mail time to ensure receipt by HCSO prior to the time and date fixed for the

acceptance of the bids. Bids or unsolicited amendments to bids, received by the HCSO after the acceptance date will not be considered.

B. The HCSO reserves the right to postpone the date for receipt and opening of bids or other deadlines and will make a reasonable effort to give at least five (5) calendar days' notice of any such postponement to each prospective Bidder.

10. ACCEPTANCE AND REJECTION: The HCSO reserves the right to reject any or all Bids, for cause, to waive irregularities, if any, and to accept the Bid (or Bids) which, in the judgment of the Sheriff, are in the best interest of the HCSO. The HCSO reserves the right to evaluate, add, and/or reject any items from any Bid options or resulting contract(s) when deemed to be in the best interest of the HCSO.
11. CONTRACT PERIOD: The Contract shall be effective for one (1) year from the date of award. By written mutual consent between the HCSO and the Awarded Supplier, the Contract may be extended on an annual basis for up to three (3) additional one (1) year periods.
12. ESCALATION/DE-ESCALATION: The HCSO will allow an escalation/de-escalation provision in this Bid. The escalation/de-escalation will be allowed provided the Awarded Supplier(s) notify the HCSO's Financial Services Division of the pending increase or decrease a minimum of 60 calendar days prior to the end of each one (1) year period for which the Bid was awarded. Said notification shall consist of manufacturer's proof of increase and shall include each individual item, the amount of increase/decrease, and the applicable Bid Item Number. Failure to comply with these instructions shall be grounds for disallowance of the escalation/de-escalation clause as stated herein.
13. ADDITION/DELETION: The HCSO reserves the right to add or delete any items from this Bid or resulting Contract(s) when deemed to be in the best interest of the HCSO. Any additions or deletions to the Bid will be considered amendments. Any additions or deletions to the Contract will constitute a Change Order and must be executed in writing and approved by the Chief Financial Officer (CFO). The Change Order will consist of a memo to the CFO describing the justification for the item addition accompanied by the Awarded Supplier's written, fixed price quote for each item to be added. If approved by the CFO, the item will be added to the Contract and recorded on the original Bid tabulation/price sheet.
14. CANCELATION: When deemed to be in the best interest of the HCSO, any contract(s) resulting from this Bid may be canceled by the following means:
 - A. 10 calendar days' written notice with cause, or;
 - B. 30 calendar days' written notice without cause.

If it becomes necessary to terminate the Contract without cause, all items and/or materials provided through the date of receipt of written notice of cancellation may be invoiced to the HCSO, and will be considered for payment providing documentation of said expenses are forwarded with the request for payment. An award may be made to the next best responsive Bid and responsible Bidder based on evaluation, or articles specified may be purchased on the open market similar to those so terminated.

15. ASSIGNMENT: The Awarded Supplier will not assign, transfer, convey, or otherwise dispose of

this contract or any part thereof, or of its right title or interest therein or its power to execute this contract or any amendment or modification hereto, to any other person, company or corporation, without prior written consent of the HCSO. Sale of a majority of corporate stocks, filing for bankruptcy or reorganization shall be considered an assignment.

16. DEFAULT: The Contract may be canceled or nullified by the HCSO's CFO in whole, or in part, by written notice of default to the Awarded Supplier(s) upon non-performance or violation of Contract terms. An award may be made to the next best responsive Bid and responsible Bidder based on evaluation, or articles specified may be purchased on the open market similar to those so terminated. Failure of the Awarded Supplier to deliver materials, or items within the time stipulated in this Bid, unless extended in writing by the Financial Services Division, shall constitute Contract default. Awarded Suppliers who default on contracts may be removed from the HCSO Supplier List and determined ineligible for future contracts at the discretion of the CFO.
17. NEXT BEST BIDDER: In the event of a default by the Awarded Supplier, or cancellation by HCSO, the HCSO reserves the right to utilize the next best responsive Bid and responsible Bidder. In the event of this occurrence, the new Awarded Supplier shall be required to provide the Bid items at the prices as contained in their BID RESPONSE (PART D), for the remainder of the award period.
18. DELIVERY: Product(s) ordered shall be delivered within 30 calendar days After Receipt of the Order (ARO) OR Product(s) ordered shall be delivered in accordance with Estimated Time for Delivery identified in Bid Response (Part C). Failure to do so shall be considered a breach of Contract or default and the HCSO may utilize its options as stated herein.

Any backordered product(s) shall be made available within 15 calendar days of the time of backorder (original date of receipt). If the backorder cannot be filled within the time frame of this requirement, the HCSO Financial Services Division shall be notified, in writing, thus permitting the HCSO to obtain the required materials/items and/or exercise its options as stated herein.

19. EMERGENCY: If and when an emergency requirement should occur, the HCSO reserves the right to deviate from this Contract and procure the item(s) from the most available source.
20. INVOICING AND PAYMENTS: The Vendor(s) may invoice the HCSO for item(s) orders as delivered. All invoices must have a unique invoice number and include: date of purchase, shipping locations, item description, item quantity shipped, item/stock number, unit price, and the HCSO Purchase Order number (unless payment is to be made by HCSO Purchasing Card). Payment shall be made in accordance with Chapter 218, Part VII, Florida Statutes which states the Vendor's rights and the HCSO's responsibilities concerning interest penalties and time limits for payment of invoices.

Timely payment of invoices is incumbent upon the HCSO and in no case shall payment exceed 45 calendar days from date of receipt of a properly approved application/invoice.

Invoices shall be e-mailed to: AccountsPayable@TeamHCSO.com.

Automated Clearing House (ACH) and HCSO Purchasing Card are the accepted methods of

payment; please inquire at (813) 247-8276 or AccountsPayable@TeamHCSO.com.

21. **EXCEPTIONS TO BID:** All Bid Responses must clearly state with specific detail all deviations to the requirements imposed upon the Bid by the GENERAL TERMS AND CONDITIONS (PART A), SPECIAL PROVISIONS (PART B) and SPECIFICATIONS (PART C). Such deviations should be stated upon the BID RESPONSE (PART D), or appended thereto. Bidders are hereby advised that the HCSO will only consider Bid Responses that meet the specifications and other requirements imposed upon them by this Bid. In instances where an exception is stated upon the BID RESPONSE (PART D), said Bid Response will be subject to rejection by the HCSO in recognition of the fact that said Bid Response does not meet the exact requirements imposed upon the Bidder by the GENERAL TERMS AND CONDITIONS (PART A) SPECIAL PROVISIONS (PART B) and SPECIFICATIONS (PART C).
22. **Supplier Diversity:** Sheriff's Office shall comply with, and shall cause each of its third-party contractors, suppliers, and professionals to comply with, all applicable laws, regulations, codes, and rules governing the design, construction, and completion of the components of the Project, including but not limited to, those relating to ADA. To ensure the maximum participation in posted HCSO solicitations, The Purchasing Office submits every bid posting to the Office of Supplier Diversity (OSD). OSD then shares the posted opportunities with OSD certified vendors to ensure exposure to businesses and increase the number of eligible Disadvantaged Minority/Disadvantaged Women Business Enterprise (DM/DWBE) and Small Business Enterprise (SBE) vendors in the area while also expanding the overall participation rate for DM/DWBE and SBE vendors overall providing greater opportunities to disadvantaged businesses.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

23. GOVERNMENTAL PURCHASING COUNCILS: All bids received shall be considered as bids to all members of the Hillsborough County and Tampa Bay Area Purchasing Cooperative, as listed below. Said members may, at their discretion, utilize this Bid as required.

Children's Board of Hillsborough County	Hillsborough County Board of County Commissioners
City of Belleair Beach	Hillsborough County Clerk of Courts
City of Clearwater	Hillsborough County School Board
City of Dunedin	Kenneth City
City of Gulfport	Manatee County Board of County Commissioners
City of Indian Rocks Beach	Pasco County Schools
City of Largo	Pinellas County Clerk of the Court
City of Oldsmar	Pinellas County Government
City of Pinellas Park	Pinellas County School Board
City of Plant City	Pinellas County Sheriff
City of Safety Harbor	Pinellas Suncoast Transit Authority
City of St. Pete Beach	Property Appraiser
City of St. Petersburg	St. Petersburg College
City of Tampa	State Attorney's Office
City of Tampa Housing Authority	Supervisor of Elections
City of Tarpon Springs	Tampa Airport
City of Temple Terrace	Tampa Bay Water
City of Treasure Island	Tampa Palms Community Development District
Clerk of the Circuit Court	Tampa Port Authority
Expressway Authority	Tampa Sports Authority
Hernando County	Tax Collector
Hillsborough Area Regional Transit Authority	Town of Indian Shores
Hillsborough Community College	
Hillsborough County Aviation Authority	

PART C - SPECIFICATIONS

1. **IN GENERAL:** The purpose of this Invitation to Bid 2022-017 is to describe the requirements of the Hillsborough County Sheriff's Office (HCSO) to secure a vendor for the procurement of Presumptive Drug Test Kits. These items are currently in use and are governed by Standard Operating Procedures (SOP) set forth by the HCSO.
2. **SPECIFICATIONS AND SCOPE OF WORK:** The requirements of this Bid include furnishing and delivering Presumptive Drug Test Kits. The items specified herein shall be purchased on an as-needed basis and consist of:

Drug Test Kit - NIK G Cocaine – Manufactured by NIK Public Safety

Drug Test Kit - NIK U Methamphetamine – Manufactured by NIK Public Safety

Drug Test Kit - NIK L Heroin – Manufactured by NIK Public Safety

Drug Test Kit - NIK A "Marquis" / General Screening – Manufactured by NIK Public Safety

Drug Test Kit - NARK 20034 Hemp/CBD

Drug Test Kit - NARK 20033 Fentanyl

Drug Test Kit - NARK 20023 Synthetic Cannabinoid

The items as specified herein are to be delivered to the location below:

Hillsborough County Sheriff's Office
Supply Distribution Bureau
1201 Orient Road, Warehouse
Tampa, Florida 33619

3. **ESTIMATED QUANTITIES:** Estimated quantities, if provided, are furnished as a guide for preparing the Bid Response (PART D) and should not be construed as representing actual quantities to be purchased under this Bid.

2. PRICING: The undersigned has carefully examined the Bid Package and all conditions affecting the cost of the item(s) required by the HCSO.

The undersigned certifies that any exceptions to the Bid specifications are noted in the BID RESPONSE, *Exceptions* (PART D, Paragraph 1). All specifications not noted thereon are as requested. The undersigned also understands that any exceptions presented after the award may be cause for cancelation of award.

We hereby propose to furnish the below described item(s) in accordance with the Bid Package, except as noted on BID RESPONSE, *Exceptions* (PART D, Paragraph 1).

Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
605	Drug Test Kit - NIK G Cocaine					396 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
606	Drug Test Kit - NIK U Methamphetamine					420 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
607	Drug Test Kit - NIK L Heroin					360 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
608	Drug Test Kit - NIK A "Marquis" / General Screening					192 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
776	Drug Test Kit - NARK 20034 Hemp/CBD					432 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
880	Drug Test Kit- NARK 20033 Fentanyl					228 boxes
Item	Description	Min Order Qty	Delivery ARO	Price Each	Qty Per Box	Estimated Annual Usage
881	Drug Test Kit - NARK 20023 Synthetic Cannabinoid					156 boxes

3. **SUPPLIER ORDER INSTRUCTIONS:** Describe the preferred method of contact to request service. (Print the information below):

Contact Name & Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Office : (____) _____ Mobile: (____) _____ Fax : (____) _____

Email : _____

Company Website : _____

4. **BID CONTACT INFORMATION:** Provide the contact information for the individual submitting this BID RESPONSE. (Please print the information below):

Company Name: _____

Contact Name & Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Office: (____) _____ Mobile: (____) _____ Fax: (____) _____

Email : _____

Describe the preferred method of contact for questions regarding this bid submission:

SIGNATURE OF AFFIRMATION AND DECLARATION

At this present time, we understand all requirements and warrant that as a serious Bidder we will comply with all the stipulations included in the Bid Package. **The undersigned must be an Officer of the Company or a designated agent empowered to bind the Company in Contract.**

The below named Bidder affirms and declares:

- a) That Bidder is of lawful age and that no other person, firm, or corporation has any interest in this Bid offered to be entered into;
- b) That this Bid is made without any understanding, agreement, or connection with any other person, firm, or corporation making a bid for the same purpose, and is in all respects fair and without collusion or fraud;
- c) That the Bidder is not in arrears to Hillsborough County or the HCSO upon debt or contract and is not a defaulter, as surety or otherwise, upon any obligation to the HCSO;
- d) That no officer, employee, or person whose salary is payable in whole, or in part, from HCSO, is, shall be, or become interested, directly or indirectly, surety or otherwise in this Bid Response; in the performance of the Contract; in the supplies, materials, equipment, and Work or labor to which they relate; or in`1 any portion of the profits thereof.

The undersigned agrees that this Bid shall remain open for 60 days following the opening of Bids.

Respectfully submitted by,

Company Name

Company Officer Name (printed) Date

Company Officer Signature Title

REFERENCE LIST

Provide a minimum of three (3) references of customers in which you supplied a similar service or commodity. Do not include Hillsborough County Sheriff's Office as one of your references.

(The use of references for a commodity bid is not standard; however, this additional information can be requested if there have been Supplier performance, product quality or delivery issues for example that would make it prudent to talk to current customers of a potential bidder. If references may influence the decision over low bidder such should be stated in the Award paragraph, Special Provision (Part B).

1.

Company Name:	
Contact/Title:	
Phone Number:	
Email Address	
Commodity Provided	

2.

Company Name:	
Contact/Title:	
Phone Number:	
Email Address	
Commodity Provided	

3.

Company Name:	
Contact/Title:	
Phone Number:	
Email Address	
Commodity Provided	

STATEMENT OF NO BID

If, for any reason, you are unable or unwilling to quote at this time, please complete the following and return by e-mail to the Buyer or by fax at (813) 242-1826. Your choices or comments below will assist us in properly notifying you of future opportunities.

We, the undersigned, have declined to respond to Bid 2022-017 for the following reason(s):

SPECIFICATIONS

NATURE OF AWARD

_____ Specifications are too "tight" (i.e., limited to one brand or manufacturer)

_____ Insufficient time was provided for response

_____ Unable to meet specifications

_____ Product or an equivalent is not offered

_____ Specifications are unclear

_____ Other

Please provide an explanation:

We request to:

_____ remain on HCSO's list for future solicitations in this service category.

_____ be removed from HCSO's list for future solicitations in this service category.

Company Name: _____

Officer Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Office : () _____ Mobile: () _____ Fax : () _____

Email : _____

Signature of Officer: _____ Date: _____

BID CHECKLIST

Company Name: _____

Include this checklist as a cover page with your Bid Package:

- ONE (1) ORIGINAL AND ONE (1) COPY of the entire Bid.
- SIGNATURES required Parts A and D.
- Any Addenda or Amendments (Signatures required).
- Completed PART D including Pricing, References and Affirmation and Declaration signature page.
- APPENDIX I – Completed *Supplier Packet* to include completed Supplier Application, W9, Direct Deposit and Business Tax Receipt or other government issued business license.
- Manufacturer literature and warranty information.
- APPENDIX II – Pricing Matrix.

PACKAGING LABEL

Below is an example LABEL which is required on the OUTSIDE of your Sealed Submittal Package. Please use this label which clearly marks the RFQ Number and Title and return to the specified address no later than the proposal due date and time.

URGENT - SEALED SUBMITTAL PACKAGE ENCLOSED	
URGENT	HILLSBOROUGH COUNTY SHERIFF'S OFFICE SHERIFF'S OPERATIONS CENTER ATTN: FINANCIAL SERVICES DIVISION – PURCHASING SECTION 2008 EAST 8 TH AVE TAMPA FL 33605
	<u>BID PACKAGE SUBMITTAL</u>
	From: _____
	BID # 2022-017
	Presumptive Drug Test Kits
	OPENING DATE/TIME: January 31, 2023 @ 3:00 PM EST

**HILLSBOROUGH COUNTY SHERIFF'S OFFICE
 INVITATION TO BID 2022-017 PRESUMPTIVE DRUG TEST KITS
 APPENDIX II - PRICING MATRIX**

Once completed, a hard copy version of this form must be printed and submitted as part of the Response.

	Estimated Annual Usage	Description:	Item #	Delivery ARO (# of days)	Quantity		Unit of Measure	Net Unit Price	EXTENDED Net Price per each
					Min. Order (in each)	Units per each			
605	396 boxes	Drug Test Kit - NIK G Cocaine				each	box	\$ - each	\$ - per each
606	420 boxes	Drug Test Kit - NIK U Methamphetamine				each	box	\$ - each	\$ - per each
607	360 boxes	Drug Test Kit - NIK L Heroin				each	box	\$ - each	\$ - per each
608	192 boxes	Drug Test Kit - NIK A "Marquis" / General Screening				each	box	\$ - each	\$ - per each
776	432 boxes	Drug Test Kit - NARK 20034 Hemp/CBD				each	box	\$ - each	\$ - per each
880	228 boxes	Drug Test Kit- NARK 20033 Fentanyl				each	box	\$ - each	\$ - per each
881	156 boxes	Drug Test Kit - NARK 20023 Synthetic Cannabinoid				each	box	\$ - each	\$ - per each

Enter information in GREEN SHADED cells only.

SUPPLIER REQUEST FORM

Chad Chronister, Sheriff
Hillsborough County Sheriff's Office
2008 East 8th Avenue
Tampa, Florida 33605



Purchasing Section
Phone: (813) 247-8034
Purchasing@HCSO.tampa.fl.us
[HTTPS://TeamHCSO.com](https://TeamHCSO.com)

To establish your business as a Supplier to the Hillsborough County Sheriff's Office, provide the following ✓ documentation along with this completed application.

Send completed forms to your HCSO Contact.

Refer to the HCSO Purchasing website [HTTPS://TeamHCSO.com/Purchasing](https://TeamHCSO.com/Purchasing) for additional information.

Business Name (as shown on your invoice): _____
 Owners Name as per IRS Records, if reporting under SS#: _____
 Parent Company (if applicable): _____
 DUNS Number: _____
 Federal Tax ID Number: _____ OR Social Security Number: _____
 Tax Status: C-Corp: S-Corp: Individual/Sole Proprietor (1099): LLC/LLP (1099):
 Business Type: Commodity Services* Visa Accepted: Yes No ACH Attached: Yes No

✓ Automated Clearing House (ACH) and HCSO Purchasing Card are the accepted methods of payment; please inquire at AccountsPayable@TeamHCSO.com or (813) 247-8276. ACH Authorization Form attached.

Phone Number: _____ Telephone Remittance and Advice Notification Email: _____
 Phone Number: _____ Fax Purchase Order Issuance Email: _____
 Phone Number: _____ Cell The above e-mails are required, but may be duplicative of other e-mails listed herein.
 Address: _____ City: _____ State: _____ Zip: _____ Remit-To
 Address: _____ City: _____ State: _____ Zip: _____ Procurement
 Address: _____ City: _____ State: _____ Zip: _____ Shipping

HCSO Supplier Group (Procurement Category Code): _____
Your HCSO Contact: _____

SALES CONTACT	ACCOUNTING CONTACT
Name: _____	Name: _____
Office Phone: _____	Phone: _____
Cell Phone: _____	Fax: _____
E-Mail: _____	E-Mail: _____

- ✓ Completed and Signed IRS Form W9 (W8 for Foreign Based Company).
- ✓ Business Tax Receipt from Hillsborough County or other municipality's business license.
- ✓ Certificates of current Liability & Workers' Compensation Insurance (for on-site service providers).*
- ✓ If your company is an LLC or LLP filing as a Corporation, provide IRS Form 8832 or Form 2553 to prevent receipt of an IRS Form 1099.

HCSO Use Only - Finance Initiator:
 HCSO Staff Requesting: _____ ABN: _____
 Payment Types Requested: Check, ACH, Legal Check, Etc. _____
 Alternate Name Requested: (FBO) (DBA) (Legacy) _____
 Supplier PO will be automatically emailed Supplier PO will be set to Print and manually emailed

HCSO Use Only - Purchasing:
 Convictions, Suspensions, or Federal Exclusions: Yes No
 If Yes, please explain: _____
 Remittance Integration ACH Initiated Payment Terms IRS Verification
 Date: _____ Verified By: _____



ACH PAYMENT AUTHORIZATION FORM

Automated Clearing House (ACH) and HCSO Purchasing Card are the accepted methods of payment; please inquire at AccountsPayable@TeamHCSO.com or (813) 247-8276. Each time a payment is disbursed to the financial institution/account provided below, an electronic notification is sent to the e-mail address notated for Remittance Notifications.

PAYEE INFORMATION:

Payee Name (Entity Name or Name of Individual)	SSN/EIN/TIN
Payee Remit-To Address	
E-Mail Address (Remittance Notifications)	Phone Number

FINANCIAL INSTITUTION INFORMATION:

Bank Name: _____

Address: _____

Routing Transit Number: _____ Account Number: _____

Type: Checking (Attach a blank voided check*) OR Savings (Attach a blank voided deposit slip*)
**A signed Letter of Verification on letterhead from your Financial Institution may be substituted.*

PAYEE CERTIFICATION:

By signing this form, I authorize payments to be deposited to the designated account and financial institution named above by the Hillsborough County Sheriff's Office for goods/ services rendered, reimbursements, or other transactions and, if necessary, to initiate other adjustments for any entries made in error. This authorization shall remain in full force and effect until withdrawn in writing with sufficient notice to allow adequate time to effect termination.

_____	_____
Name (Please Print)	Title
_____	_____
Signature	Date

Please return completed form and blank voided check/deposit slip or Bank Letter* to Hillsborough County Sheriff's Office, ATTN: Purchasing, 2008 East 8th Avenue, Tampa, Florida 33605 or Purchasing@HCSO.tampa.fl.us.

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. 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; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



Refer to the HCSO Purchasing website [HTTPS://TeamHCSO.com/Purchasing](https://TeamHCSO.com/Purchasing) Doing Business with HCSO for additional information.

Additional documentation available from our above-mentioned website include:

- [HCSO Holiday Schedule](#)
 - Outline of business days observed by the Hillsborough County Sheriff's Office (HCSO) as Holidays
- [Vendor Application Packet](#)
 - A Packet which contains a Supplier Request Form, ACH Payment Authorization Form, and a blank W9
- [ACH Payment Authorization Form](#)
 - A Form utilized by the Hillsborough County Sheriff's Office to initiate new, or update existing, Automated Clearing House (ACH) payment information to process payments.
- [Federal Grant Compliance Acknowledgment](#)
 - A document utilized to document Acknowledgment of the requirements of the HCSO and Supplier(s) in regard to public competitive procurements and other purchases made with Federal Grant Funds.
- [HCSO's Purchasing Terms and Conditions](#)
 - General Purchasing Terms and Conditions of the HCSO agreed to upon acceptance and fulfillment of a Purchase Order (PO) for goods or services.
- [Procurement Codes \(HCSO Supplier Groups\)](#)
 - List of supplier categories HCSO personnel may use to search for purveyors of certain goods or service descriptions within our Supplier Database.
- [HCSO's Tax Exemption Certificate](#)
 - The Hillsborough County Board of County Commissioners (BOCC) and all agencies funded by the BOCC such as HCSO are eligible for Florida State Sales Tax Exemption.
- [HCSO's W-9](#)
 - Completed Request for Taxpayer Identification number and Certification for HCSO including Employer Identification Number.

Name (Please Print)	Title
Signature	Date