

ILLINOIS FINANCE AUTHORITY

Trustee/Custodian Services
#14-0002

The Illinois Finance Authority is requesting Offers (bids / proposals) from qualified financial institutions with the experience, capability and expertise in providing Trustee/Custody services. Please read the entire solicitation package and submit your Offer for evaluation in accordance with all instructions.

IFA is issuing this solicitation in the following form which Vendor must take into account when responding:

Invitation for Bids Request for Proposals

The solicitation package consists of the following sections which provide information necessary for submitting an Offer set forth the basic legal and policy requirements associated with this solicitation.

SECTION 1 INSTRUCTIONS, DATES, RESERVATIONS AND OTHER GENERAL INFORMATION
SECTION 2 EVALUATION OF OFFERS
SECTION 3 SPECIFICATIONS / QUALIFICATIONS / STATEMENT OF WORK
SECTION 4 RESPONSIBILITY FORMS

In this document, the Illinois Finance Authority will be referred to as "IFA", "Authority", "we" or "us". The person submitting an Offer will be referred to as "Vendor", "Contractor" or "You". "We" is used appropriate to the content.

SECTION 1 - INSTRUCTIONS, DATES, RESERVATIONS AND OTHER GENERAL INFORMATION

1.0 PROJECT CONTACT: Questions regarding this solicitation must be sent to the Project Contact identified in this section by October 10, 2013. IFA will provide written responses to questions and only those written responses shall be binding on IFA.

A Quiet Period will begin October 7, 2013 and end upon award of any resulting contracts from this RFP. The objective of the Quiet Period is to ensure that Vendors competing for contracts have equal access to information regarding selection parameters, communication related to selection are consistent and accurate and the process of selecting Vendors is transparent, efficient, diligent and fair. Please do not communicate with IFA Board Members or Staff regarding any product or service related to this RFP throughout the Quiet Period and refrain from offering meals, travel, hotel or anything of value to IFA Board Members or Staff during this time. You may be disqualified from consideration for a knowing violation of the Quiet Period policy. The project contact for this solicitation:

Terrell Gholston
Illinois Finance Authority
180 North Stetson, Suite 2555
Chicago, IL 60601

Phone: 312-651-1331
Fax: 312-651-1350
TDD: 800-526-0844
E-mail: tgholston@il-fa.com

1.2 OFFER DUE DATE, TIME AND SUBMISSION LOCATION:

DELIVER OFFERS TO:

Illinois Finance Authority
Attn: Terrell Gholston
180 N. Stetson, Suite #2555
Chicago, IL 60601

LABEL OUTSIDE OF ENVELOPE / CONTAINER:

Trustee/Custodian Services & Ref. #14-0002
Due Date: October 15, 2013
Time: 12:00 PM CST
[Vendor Name & Address]

Offers must be physically received as specified by the Due Date, Time and Delivery Location. IFA will not accept e-mail, fax or other electronic submissions. Prior to the due date, Vendor may mail or hand-deliver Offers, modifications and withdrawals. Offers, modifications or withdrawals submitted after the due date and time will not be considered. All times are State of Illinois local times.

1.3 NUMBER OF COPIES: Vendors must submit a signed original and three (3) copies of the Offer on CD in PDF formats. If requesting confidential treatment of any submitted information, you must make that request in the form and manner specified elsewhere in this solicitation. A request for confidential treatment will not supersede IFA's legal obligations under Illinois Freedom of Information Act (FOIA) (5 ILCS 140).

1.4 OFFER FIRM TIME: Vendor Offer must remain firm until contract execution.

1.5 PROTEST REVIEW OFFICE:

Illinois Finance Authority
Attn: General Counsel
180 North Stetson, Suite 2555
Chicago, IL 60601

Phone: 312-651-1300
Fax: 312-651-1350
TDD: 800-526-0844

Vendor may submit a written protest of IFA's actions to the PROTEST REVIEW OFFICE as stated above. IFA must physically receive the protest by 5:00pm of the seventh calendar day after the notice of award was published on the Procurement Bulletin.

1.6 PUBLIC CONTRACTS NUMBER: (775 ILCS 5/2-105) If you do not have a Department of Human Rights' (DHR) Public Contracts Number or have not submitted a completed application to DHR for one before opening we may not be able to consider your Offer. Please contact DHR at 312-814-2431 or visit <http://www.state.il.us/dhr/index.htm> for forms and details.

1.7 OUT OF STATE COMPANIES: Non-Illinois Proposers must contact the Illinois Secretary of State (217-782-1834) regarding a Certificate of Authority to Transact Business in Illinois. Additional information is at http://www.cyberdriveillinois.com/departments/business_services/publications_and_forms/bca.html.

1.8 ILLINOIS PROCUREMENT BULLETIN (Bulletin) AND IFA WEBSITE: IFA will publish procurement information (including updates) in the electronic Bulletin (<http://www.purchase.state.il.us>), and on IFA's website (<http://www.il-fa.com>). Procurement information may not be available in any other form or locations. Vendors are responsible for monitoring both the Bulletin and IFA's website; and IFA cannot be held responsible if you fail to receive optional e-mail notices.

1.9 AWARD: IFA will post a notice on the Bulletin identifying the apparent awardee(s). The notice extends the Offer Firm Time until IFA signs a contract(s) or determines not to sign a contract. IFA may accept or reject your Offer as submitted, or may require contract negotiations. If negotiations do not result in an acceptable agreement, IFA may reject your Offer and begin negotiations with another Vendor. Protested awards are not final and are subject to resolution of the protest.

1.10 PUBLIC RECORDS AND REQUESTS FOR CONFIDENTIAL TREATMENT: Offers become the property of IFA and will not be returned. All Offers will be open to the public under the Illinois Freedom of Information Act (FOIA) (5 ILCS 140) and other applicable laws and rules, unless you request in your Offer that IFA treat certain information as exempt. A request for confidential treatment will not supersede IFA's legal obligations under FOIA. IFA will not honor requests to exempt entire Offers. Vendor must show specific grounds in FOIA or other law or rule that support exempt treatment. If exempt treatment is requested, vendor must submit an additional copy of the Offer with exempt information deleted. This copy must tell the general nature of the material removed and shall retain as much of the Offer as possible. Vendor will be responsible for any costs or damages associated with our defending your request for exempt treatment. Vendor agrees IFA may copy the Offer to facilitate evaluation, or to respond to requests for public records and warrant that such copying will not violate the rights of any third party.

1.11 RESERVATIONS: IFA reserves the right to amend the solicitation; reject any or all Offers; to award by item, group of items, and to waive minor defects. IFA may request a clarification; request a presentation; or otherwise verify the contents of the Offer, including information about subcontractors and suppliers. IFA may request Best & Final Offers when appropriate and shall make decisions solely in the best interests of IFA. This competitive process requires that you provide additional information and otherwise cooperate with us. If you do not comply with request for information and cooperate, we may reject your Offer. You have no right to an award by submitting an Offer, nor do you have the right to a contract based on our posting your name in a Bulletin notice. IFA is not responsible for and will not pay any costs associated with the preparation and submission of your Offer. If you are the awardee(s), you shall not commence, and will not be paid for any work prior to the date all parties execute the contract, unless approved in writing in advance by IFA's Procurement Officer (or his designee).

1.12 GOVERNING LAW AND FORUM: Illinois law and rule govern this solicitation and any resulting contract. You must bring any action relating to this solicitation or any resulting contract in the appropriate court in Illinois. We do not allow binding arbitration.

1.13 EMPLOYMENT TAX CREDIT: Vendors who hire qualified veterans and certain ex-offenders may be eligible for tax credits. Please contact the Illinois Dept. of Revenue (312-814-3215) for information about tax credits.

SECTION 2 – EVALUATION OF OFFERS

2.1 OFFER RESPONSE:

IFA will evaluate the information provided in evaluating your Offer: Experience, Customer Service, Responsiveness, Price, and M/W/DBE. Any failure or deficiency may result in the rejection of the Offer.

2.1.1 ADMINISTRATIVE COMPLIANCE: IFA will determine whether your Offer complied with the Instructions for submitting Offers. Except for late submissions, IFA may require a Vendor to correct deficiencies as a condition of further evaluation.

2.1.2 RESPONSIBILITY: IFA will determine whether you are a “Responsible” Vendor; a Vendor with whom IFA can or should do business. Factors that IFA may evaluate to determine Responsibility include, but are not limited to: certifications, conflict of interest, financial disclosures, taxpayer identification number, past performance, references (including those found outside the Offer,) compliance with applicable laws, financial stability and the perceived ability to perform completely as specified. Vendors must at all times have financial resources sufficient, in the opinion of IFA, to ensure performance of the contract and must provide proof upon request. IFA may terminate the Contract, consistent with the termination for cause provision of this Contract, if it feels that the Vendor lacks the financial resources to perform under the Contract.

2.1.3 RESPONSIVENESS: IFA will determine whether the Offer meets the stated requirements. **All responses are limited to 10 pages with the exception of appendices in section 3.5.1.** Minor differences or deviations with negligible impact on the price or suitability of the supply or service to meet IFA’s needs may be accepted or corrections allowed. If no administratively compliant and responsible Vendor meets a particular requirement, IFA may waive such requirement.

2.1.4 PRICE: We will identify the lowest priced offer that meets requirements. We will rank Offers in order of Price.

2.1.5 M/W/DBE: Entity is certified as M/W/DBE by the State of Illinois. Vendors who are certified as M/W/DBE by the State of Illinois will receive 5 points.

2.2 AWARD:

The IFA may make one or more awards. The Vendor(s) whose Offer meets the Qualifications, Experience, Responsive requirement and is considered the best of those submitted (without consideration of price) and with whom IFA is able to negotiate a fair and reasonable price will be recommended for the award.

IFA will attempt to negotiate a fair and reasonable Price with the Vendor(s) with the best Offer. If IFA cannot negotiate a fair and reasonable price, IFA reserves the right to award and negotiate with the next highest ranked Vendor. IFA will determine whether the price is fair and reasonable by considering the Offer, including the Vendor’s qualifications, the Vendor’s reputation, all prices submitted, other known prices, the project budget and other relevant factors based on the criteria described above and the Responsiveness scoring elements described below. The maximum number of points is 100:

Responsiveness Elements

- A. Experience [40 points]
- B. Customer Service [30 points]
- C. Responsiveness [15 points]

IFA may require in-person presentations by highly rated Vendors based upon our review of proposals submitted in response to this proposal and initial technical scores. IFA will notify and invite only those Vendors who are top contenders based upon technical scores.

SECTION 3 - SPECIFICATIONS / QUALIFICATIONS / STATEMENT OF WORK

3.1 AGENCY'S NEED FOR SERVICES

IFA seeks qualified financial institutions to serve as, and to perform the responsibilities of Bond Trustee including service as receiving agent for loan repayments, disbursement of unpledged loans and funds, investment of unpledged funds if necessary, maintenance of transaction records and reporting to the Authority and its partners. Trustee shall also serve as custodian to hold the assets for safekeeping on behalf of the Authority.

3.2 SERVICES REQUIRED

a) Service As Bond Trustee

- i. Perform the services of a trustee, bond registrar and paying agent in full compliance with all applicable federal and state laws, regulations, tax rulings, judicial and administrative orders and decrees and Bond Indentures
- ii. Receipt and management of Borrower loan pledged repayments on a daily basis.
- iii. Disburse pledged funds and investment of pledged funds on a regular basis.
- iv. Administer various bond related accounts including revenue funds, debt service funds, reserve funds, cost of issuance funds and rebate funds.
- v. Maintain financial transaction records, provide appropriate reporting and respond to requests as directed.
- vi. Make applicable rebate payments pursuant to direction received.

b) Service As Receiving Agent

- i. Receive and manage Borrower unpledged loan repayments on a daily basis.
- ii. Disburse unpledged funds and investment of unpledged funds on a regular basis.
- iii. Respond to requests from and provide reporting as directed
- iv. Maintenance of financial transaction records.

c) Service As Custodian

- i. To hold agency and other fiduciary assets for safe keeping on behalf of the Authority

3.3 REPORTING, STATUS AND MONITORING

3.3.1 The IFA and the Vendor(s) shall agree on the appropriate benchmark indices for evaluating portfolio performance. At IFA's option, the Parties will work together to monitor performance during the contract term. This may include use of a performance scorecard with conditions, milestones, requirements, or timetables that must be met before additional steps may be taken, or payment is due. The scorecard may also record matters related to price, service, quality and other factors deemed important.

3.3.2 Vendor shall cooperate with IFA in this monitoring activity, which may require that Vendor report progress and problems (with proposed resolutions), provide records of its performance, allow random inspections of its facilities, participate in scheduled meetings and provide management reports as requested by IFA.

3.4 VENDOR AND STAFF REQUIREMENTS

3.4.1 Organization and Personnel: Vendor shall have been a bond trustee for a minimum of 5 years; and with respect to Section 3.2(C) must be custodian of agency assets for a minimum of 3 years.

3.4.2 Vendor References: Provide two (2) examples of engagements where Vendor has served as Bond Trustee for clients, including the name, contact information and a description of the services provided.

3.4.3 Vendor References: Provide two (2) examples of engagements where Vendor has served as Custodian for agency assets, including the name, contact information and a description of the services provided.

3.5 Price

Vendor shall provide separate price proposals for the services listed under Section 3.2 (A and B) and for Section 3.2 (C).

3.6 TERM OF CONTRACT

To be determined, provided however, that the term of the Contract shall in the case of Bond Trustee extend to the term of the Bond (s). In all other cases, the initial term shall not be more than 5 years. The resulting Contract(s) may be renewed at IFA's sole discretion for a total of two (2) years at the same terms and conditions as the original Contract.

SECTION 4 – RESPONSIBILITY FORMS

FINANCIAL DISCLOSURES AND CONFLICTS OF INTEREST

The Financial Disclosures and Conflicts of Interest form (“form”) must be accurately completed and submitted by the Vendor, parent entity(ies), and subcontractors. There are **nine** steps to this form and each must be completed as instructed in the step heading and within the step. A bid, offer, or proposal that does not include this form shall be considered non-responsive. We will consider this form when evaluating the bid, offer, or proposal or awarding the contract.

The requirement of disclosure of financial interests and conflicts of interest is a continuing obligation. If circumstances change and the disclosure is no longer accurate, then disclosing entities must provide an updated form.

Separate forms are required for the Vendor, parent entity(ies), and subcontractors.

This disclosure is submitted for:

- Vendor
- Vendor’s Parent Entity(ies) (100% ownership)
- Subcontractor(s) >\$50,000
- Subcontractor’s Parent Entity(ies) (100% ownership) > \$50,000

Project Name	
Illinois Procurement Bulletin Number	
Contract Number	
Vendor Name	
Doing Business As (DBA)	
Disclosing Entity	
Disclosing Entity’s Parent Entity	
Subcontractor	
Instrument of Ownership or Beneficial Interest	<input type="checkbox"/> If you selected Other, please describe:

STEP 1

SUPPORTING DOCUMENTATION SUBMITTAL

(All Vendors complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

You must select one of the six options below and select the documentation you are submitting. You must provide the documentation the applicable section requires with this form.

Option 1 – Publicly Traded Entities

- 1.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% (\$106,447.20) of the annual salary of the Governor.

OR

- 1.B. Attach a copy of the Federal 10-K, and skip to Step 3.

Option 2 – Privately Held Entities with more than 200 Shareholders

- 2.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% (\$106,447.20) of the annual salary of the Governor.

OR

- 2.B. Complete Step 2, Option A for each qualifying individual or entity holding any ownership share in excess of 5% and attach the information Federal 10-K reporting companies are required to report under 17 CFR 229.401.

Option 3 – All other Privately Held Entities, not including Sole Proprietorships

- 3.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% (\$106,447.20) of the annual salary of the Governor.

Option 4 – Foreign Entities

- 4.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% (\$106,447.20) of the annual salary of the Governor.

OR

- 4.B. Attach a copy of the Securities Exchange Commission Form 20-F or 40-F and skip to Step 3.

Option 5 – Not-for-Profit Entities

- Complete Step 2, Option B.

Option 6 – Sole Proprietorships

- Skip to Step 3.

STEP 2

DISCLOSURE OF FINANCIAL INTEREST OR BOARD OF DIRECTORS

(All Vendors, except sole proprietorships, must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

Complete **either** Option A (for all entities other than not-for-profits) or Option B (for not-for-profits). Additional rows may be inserted into the tables or an attachment may be provided if needed.

OPTION A – Ownership Share and Distributive Income

Ownership Share – If you selected Option 1.A., 2.A., 2.B., 3.A., or 4.A. in Step 1, provide the name and address of each individual or entity and their percentage of ownership if said percentage exceeds 5%, or the dollar value of their ownership if said dollar value exceeds \$106,447.20.

Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE – X			
Name	Address	Percentage of Ownership	\$ Value of Ownership

Distributive Income – If you selected Option 1.A., 2.A., 3.A., or 4.A. in Step 1, provide the name and address of each individual or entity and their percentage of the disclosing Proposer’s total distributive income if said percentage exceeds 5% of the total distributive income of the disclosing entity, or the dollar value of their distributive income if said dollar value exceeds \$106,447.20.

Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE – Y			
Name	Address	% of Distributive Income	\$ Value of Distributive Income

Please certify that the following statements are true.

I have disclosed all individuals or entities that hold an ownership interest of greater than 5% or greater than \$106,447.20.

Yes No

I have disclosed all individuals or entities that were entitled to receive distributive income in an amount greater than \$106,447.20 or greater than 5% of the total distributive income of the disclosing entity.

Yes No

OPTION B – Disclosure of Board of Directors (Not-for-Profits)

If you selected Option 5 in Step 1, list members of your board of directors. Please include an attachment if necessary.

TABLE – Z	
Name	Address

STEP 3
DISCLOSURE OF LOBBYIST OR AGENT
 (Complete only if bid, offer, or contract has an annual value over \$25,000)
 (Subcontractors with subcontract annual value of more than \$50,000 must complete)

Yes No. Is your company represented by or do you employ a lobbyist required to register under the Lobbyist Registration Act (lobbyist must be registered pursuant to the Act with the Secretary of State) or other agent who is not identified through Step 2, Option A above and who has communicated, is communicating, or may communicate with any State/Public University officer or employee concerning the bid or offer? If yes, please identify each lobbyist and agent, including the name and address below.

If you have a lobbyist that does not meet the criteria, then you do not have to disclose the lobbyist’s information.

Name	Address	Relationship to Disclosing Entity

Describe all costs/fees/compensation/reimbursements related to the assistance provided by each representative lobbyist or other agent to obtain this contract:

STEP 4

PROHIBITED CONFLICTS OF INTEREST

(All Proposers must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

Step 4 must be completed for each person disclosed in Step 2, Option A and for sole proprietors identified in Step 1, Option 6 above. Please provide the name of the person for which responses are provided:

1. Do you hold or are you the spouse or minor child who holds an elective office in the State of Illinois or hold a seat in the General Assembly? Yes No
2. Have you, your spouse, or minor child been appointed to or employed in any offices or agencies of State government and receive compensation for such employment in excess of 60% (\$106,447.20) of the salary of the Governor? Yes No
3. Are you the spouse or minor child of an officer or employee of the Capital Development Board or the Illinois Toll Highway Authority? Yes No
4. Have you, your spouse, or an immediate family member who lives in your residence currently or who lived in your residence within the last 12 months been appointed as a member of a board, commission, authority, or task force authorized or created by State law or by executive order of the Governor? Yes No
5. If you answered yes to any question in 1-4 above, please answer the following: Do you, your spouse, or minor child receive from the Proposer more than 7.5% of the Proposer's total distributable income or an amount of distributable income in excess of the salary of the Governor (\$177,412.00)? Yes No
6. If you answered yes to any question in 1-4 above, please answer the following: Is there a combined interest of self with spouse or minor child more than 15% (\$354,824.00) in the aggregate of the Proposer's distributable income or an amount of distributable income in excess of two times the salary of the Governor? Yes No

STEP 5

POTENTIAL CONFLICTS OF INTEREST RELATING TO PERSONAL RELATIONSHIPS

(Complete only if bid, offer, or contract has an annual value over \$25,000)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

Step 5 must be completed for each person disclosed in Step 2, Option A and for sole proprietors identified in Step 1, Option 6 above.

Please provide the name of the person for which responses are provided:

1. Do you currently have, or in the previous 3 years have you had State employment, including contractual employment of services? Yes No
2. Has your spouse, father, mother, son, or daughter, had State employment, including contractual employment for services, in the previous 2 years? Yes No
3. Do you hold currently or have you held in the previous 3 years elective office of the State of Illinois, the government of the United States, or any unit of local government authorized by the Constitution of the State of Illinois or the statutes of the State of Illinois? Yes No
4. Do you have a relationship to anyone (spouse, father, mother, son, or daughter) holding elective office currently or in the previous 2 years? Yes No
5. Do you hold or have you held in the previous 3 years 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? Yes No
6. Do you have a relationship to anyone (spouse, father, mother, son, or daughter) holding appointive office currently or in the previous 2 years? Yes No
7. Do you currently have or in the previous 3 years had employment as or by any registered lobbyist of the State government? Yes No
8. Do you currently have or in the previous 2 years had a relationship to anyone (spouse, father, mother, son, or daughter) that is or was a registered lobbyist? Yes No
9. Do you currently have or in the previous 3 years had compensated employment 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
10. Do you currently have or in the previous 2 years had a relationship to anyone (spouse, father, mother, son, or daughter) who is or was a compensated employee of any registered election or reelection 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

STEP 6

EXPLANATION OF AFFIRMATIVE RESPONSES

(All Vendors must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

If you answered "Yes" in Step 4 or Step 5, please provide on an additional page a detailed explanation that includes, but is not limited to the name, salary, State agency or university, and position title of each individual.

STEP 7

POTENTIAL CONFLICTS OF INTEREST RELATING TO DEBARMENT & LEGAL PROCEEDINGS

(Complete only if bid, offer, or contract has an annual value over \$25,000)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

This step must be completed for each person disclosed in Step 2, Option A, Step 3, and for each entity and sole proprietor disclosed in Step 1.

Please provide the name of the person or entity for which responses are provided:

1. Within the previous ten years, have you had debarment from contracting with any governmental entity? Yes No
2. Within the previous ten years, have you had any professional licensure discipline? Yes No
3. Within the previous ten years, have you had any bankruptcies? Yes No
4. Within the previous ten years, have you had any adverse civil judgments and administrative findings? Yes No
5. Within the previous ten years, have you had any criminal felony convictions? Yes No

If you answered "Yes", please provide a detailed explanation that includes, but is not limited to the name, State agency or university, and position title of each individual.

STEP 8

DISCLOSURE OF CURRENT AND PENDING CONTRACTS

(Complete only if bid, offer, or contract has an annual value over \$25,000)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

If you selected Option 1, 2, 3, 4, or 6 in Step 1, do you have any contracts, pending contracts, bids, proposals, subcontracts, leases or other ongoing procurement relationships with units of State of Illinois government?

Yes No.

If "Yes", please specify below. Attach an additional page in the same format as provided below, if desired.

Agency/University	Project Title	Status	Value	Contract Reference/P.O./Illinois Procurement Bulletin #

Please explain the procurement relationship:

STEP 9

SIGN THE DISCLOSURE

(All Proposers must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than \$50,000 must complete)

This disclosure is signed, and made under penalty of perjury for all for-profit entities, by an authorized officer or employee on behalf of the bidder or offeror pursuant to Sections 50-13 and 50-35 of the Illinois Procurement Code. This disclosure information is submitted on behalf of:

Name of Disclosing Entity:

Signature: _____

Date:

Printed Name:

Title:

Phone Number:

Email Address:

State Board of Elections Registration

Section 50-37 of the Illinois Procurement Code prohibits political contributions of certain Vendors, bidders and offerors. Additionally, section 9-35 of the Illinois Election Code governs provisions relating to reporting and making contributions to state officeholders, declared candidates for State offices and covered political organizations that promote the candidacy of an officeholder or declared candidate for office. IFA may declare any resultant contract void if these Acts are violated.

Generally, if a Vendor, bidder, or offeror is an entity doing business for profit (i.e. sole proprietorship, partnership, corporation, limited liability company or partnership, or otherwise) and has contracts with State agencies that annually total more than \$50,000 or who has aggregate pending bids or proposals and current State contracts that total more than \$50,000, the Proposer, bidder, or offeror is prohibited from making political contributions and must register with the State Board of Elections.

EVIDENCE OF REGISTRATION WITH THE STATE BOARD OF ELECTIONS IS THE CERTIFICATE OF REGISTRATION




AUTHORIZED TO DO BUSINESS IN ILLINOIS

A person, other than an individual acting as a sole proprietor, must be a duly constituted legal entity and authorized to do business in Illinois prior to submitting an offer.

For information on registering to conduct business in Illinois, please visit the Illinois Secretary of State's Department of Business Services at their website at (http://cyberdriveillinois.com/departments/business_services/home.html) or your home county clerk.

EVIDENCE OF BEING AUTHORIZED TO DO BUSINESS IS THE SECRETARY OF STATE'S CERTIFICATE OF GOOD STANDING

File Number 776-383-1




To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

XYZ CONSULTING, INC. INCORPORATED IN GEORGIA AND LICENSED TO TRANACT BUSINESS IN THIS STATE ON JANUARY 20, 2011, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES AND AS OF THIS DATE IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO TRANACT BUSINESS IN THE STATE OF ILLINOIS.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 7TH day of JUNE A.D. 2011 .



Jesse White

ALPHAWHITE 8 - 115841214
APPROVED BY: <http://www.cyberdriveillinois.com>

Illinois Finance Authority
Taxpayer Identification Number

I certify that:

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

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

I am a U.S. person (including a U.S. resident alien).

- If you are an individual, enter your name/ SSN as it appears on your Social Security Card.
- If you are a sole proprietor, enter the owner's name on the name line followed by the name of the business and the owner's SSN or EIN.
- If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's name on the name line and the D/B/A on the business name line and enter the owner's SSN or EIN.
- If the LLC is a corporation or partnership, enter the entity's business name and EIN and for corporations, attach IRS acceptance letter (CP261 or CP277).
- For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.

Name: _____

Business Name: _____

Taxpayer Identification Number:

Social Security Number: _____

or

Employer Identification Number: _____

Legal Status (check one):

- | | |
|--|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Governmental |
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Nonresident alien |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Estate or trust |
| <input type="checkbox"/> Legal Services Corporation | <input type="checkbox"/> Pharmacy (Non-Corp.) |
| <input type="checkbox"/> Tax-exempt | <input type="checkbox"/> Pharmacy/Funeral Home/Cemetery (Corp.) |
| <input type="checkbox"/> Corporation providing or billing
medical and/or health care services | <input type="checkbox"/> Limited Liability Company
(select applicable tax classification) |
| <input type="checkbox"/> Corporation NOT providing or billing
medical and/or health care services | <input type="checkbox"/> D = disregarded entity |
| <input type="checkbox"/> P = partnership | <input type="checkbox"/> C = corporation |

Signature of Authorized Representative _____ Date: _____