

BID PROPOSAL FORM (Page 1)

Screen Printed Items

Bid #21-005

BIDDERS SHOULD NOT AMEND THIS FORM IN ANY WAY

ANY QUESTIONS SHOULD BE RESOLVED PRIOR TO SUBMITTING BIDS

The undersigned hereby proposes to furnish and deliver all the items listed herewith for the amounts shown below. If there is a price difference for various sizes, please note them in the lines provided. The first two lines will be the price for all youth and adult apparel sizes. Lines 3 and 4 will be for any exceptions as shown in the example.

EXAMPLE

"Polo" Style Button-collared Shirt – all colors, generic Polo style shirt, short sleeve, plain front (no emblems)

Youth – S, M, L

Adult – S, M, L, XL, 2X, 3X, 4X, 5X

Price - 5.00 Sizes – YOUTH (per item) **All sizes**

Price - 5.25 Sizes – Adult (per item) **All sizes with exceptions noted below**

Price - 5.50 Sizes – 3x and up (per item)

Price - _____ Sizes – _____ (per item)

- 1. Short Sleeve Polo Style Collared Shirts**– All colors, three button placket, short sleeves, Preshrunk, 100% cotton jersey **or** preshrunk 50% cotton/50% moisture wicking polyester jersey, reinforced double needle bottom hem, stain resistant (optional), plain front (no emblems), **not less than 5.6-oz.**

Youth Sizes – XS, S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X, 4X, 5X

Price - ^(A) ~~5.25~~ 4.99 Sizes – YOUTH (per item) **All sizes**

Price - ^(A) ~~5.00~~ 4.99 Sizes – ADULT S-XL (per item) **All sizes with exceptions noted below**

Price - 7.49 Sizes – XXL (per item)

Price - 7.79 Sizes – XXXL+ (per item)

- 2. Long Sleeve Polo Style Collared Shirts**– All colors, three button placket, short sleeves, Preshrunk, 100% cotton jersey **or** preshrunk 50% cotton/50% moisture wicking polyester jersey, reinforced double needle bottom hem, stain resistant (optional), plain front (no emblems), **not less than 5.6-oz.**

Youth Sizes – XS, S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X, 4X, 5X

Price - 7.29 Sizes – YOUTH (per item) **All sizes**

Price - 9.15 Sizes – ADULT S-XL (per item) **All sizes with exceptions noted below**

Price - 10.49 Sizes – XXL (per item)

Price - 12.99 Sizes – XXXL+ (per item)

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- 3. Short Sleeve T-shirts**— All colors, pre-shrunk, 100% cotton jersey or 50% cotton/50% moisture wicking polyester jersey, taped neck and shoulder, double needle sleeve and bottom hem, **not less than 5.3-o.z.**

Youth Sizes – XS, S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X, 4X, 5X

Price - 3.30 Sizes – YOUTH (per item) *All sizes*

Price - 3.30 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 5.39 Sizes – XXL (per item)

Price - 5.89 Sizes – XXXL+ (per item)

- 4. Long Sleeve T-shirts**— All colors, pre-shrunk, 100% cotton jersey or 50% cotton/50% moisture wicking polyester jersey, taped neck and shoulder, double needle sleeve and bottom hem, **not less than 5.3-o.z.**

Youth Sizes – XS, S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X, 4X, 5X

Price - 4.79 Sizes – YOUTH (per item) *All sizes*

Price - 4.89 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 6.05 Sizes – XXL (per item)

Price - 7.35 Sizes – XXXL+ (per item)

- 5. Crewneck Sweatshirts**— All colors, pre-shrunk, 75% ring-spun cotton/25% polyester **OR** 50% cotton/50% moisture wicking polyester, mid-weight, long-sleeves, banded sleeves and bottom, double needle stitching, pill-free, **not less than 8-oz** for youth and **8.5-oz** for adult sizes.

Youth Sizes – S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X

Price - 6.45 Sizes – YOUTH (per item) *All sizes*

Price - 6.98 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 9.00 Sizes – XXL (per item)

Price - 9.00 Sizes – XXXL+ (per item)

- 6. Hooded Sweatshirts**— All colors, pre-shrunk, pill free, 50% cotton/50% moisture wicking polyester **OR** 75% ring-spun cotton/25% polyester, mid-weight, long-sleeve, banded sleeves and bottom, optional pouch pocket, not less than **8-oz** for youth and **8.5-oz** for adult sizes.

Youth Sizes – S, M, L, XL

Adult Sizes - S, M, L, XL, 2X, 3X

Price - 10.75 Sizes – YOUTH (per item) *All sizes*

Price - 10.95 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 13.85 Sizes – XXL (per item)

Price - 14.99 Sizes – XXXL+ (per item)

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- 7. Sweat pants**— All colors, preshrunk, pill free, 50% cotton/50%polyester **OR** 50% cotton/50% moisture wicking polyester, mid-weight, drawstring, pockets, open **OR** elastic cuff bottom, **not less than 8-oz**

Youth Sizes – S, M, L
Adult Sizes - S, M, L, XL, 2X, 3X

Price - 8.50 Sizes – YOUTH (per item) *All sizes*

Price - 8.89 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 11.69 Sizes – XXL (per item)

Price - 11.69 Sizes – XXXLT (per item)

- 8. Track Shorts**— All colors, 100% polyester wicking knit, covered elastic waistband and inside drawstring, matching inner brief with leg elastic side vents, no pockets, contrast color side inserts, self-fabric binding on hem

Youth – S, M, L, XL 5-inch inseam
Women's - S, M, L, XL, 2X, 3X 4- inch inseam
Men's – S, M, L, XL, 2X, 3X 5- inch inseam

Price - 8.85 Sizes – YOUTH (per item) *All sizes*

Price - 8.96 Sizes – ADULT S-XL (per item) *All sizes with exceptions noted below*

Price - 11.85 Sizes – XXL (per item)

Price - 13.15 Sizes – XXXLT (per item)

- 9. Athletic Shorts**— All colors, 100% polyester, moisture management/anti-microbial fabric, athletic cut, covered waistband and drawstring, side pockets (adult sizes only), double-needle hem

Youth – S, M, L 6-inch inseam
Adult - S, M, L, XL, 2X, 3X, 4X 10-inch inseam

Price - 7.50 Sizes – YOUTH (per item) *All sizes*

Price - 7.50 Sizes – Adult S-XL (per item) *All sizes with exceptions noted below*

Price - 11.00 Sizes – XXL (per item)

Price - 13.85 Sizes – XXXLT (per item)

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10. Baseball Caps— For adult: Six-panel, low-profile brushed twill cap, unconstructed crown, top buttons and eyelets, fabric closure with silver buckle and hideaway closure, **OR** six-panel athletic mesh with polyester/spandex, structured, mid profile, fitted cap with fused buckram sewn into front of crown, 3-1/2" crown with silver under visor. **For youth:** heavy twill, solid color, six-panel, cotton, low profile, self-fabric back strap with buckle, no buckram

Sizes – One Size Youth \$ 4.50
One Size Adult \$ 4.50

11. Beanie Hat—Solid color beanie with cuff; stretchy, 100% acrylic, cuffed bottom with 4" x 2" embroidery area; one size fits most adults. Must be available in an array of colors such as navy, black, red, green, etc.

One Size Fits Most Adults: \$ 3.15

12. Beanie Hat with Pom-Pom—Two-tone knit pom-pom beanie with cuff; stretchy, 100% acrylic; cuffed bottom with 4"x 2" embroidery area; large two-tone pom-pom and bold accent stripes; one size fits most adults. Must be available in navy and white combination and an array of other two-tone colors.

One Size Fits Most Adults: \$ 4.89

13. Ear Headband—Fabric **100%** Polyester Fleece; one size fits most. Must be available in an array of colors such as navy, black, red, green, etc.

One Size Fits Most Adults: \$ 2.89

14. Scarf—Striped two-tone scarf; 100% acrylic knit; double layer open end. Must be available in navy and white combination and an array of other two-tone color combinations.

One Size Fits Most Adults: \$ 6.99

15. Scarf—Solid color; 100% acrylic knit; dyed to match overlay stitching; 80"x10". Must be available in an array of colors such as navy, black, red, green, etc.

One Size Fits Most Adults: \$ 3.99

16. Fleece Blankets—Polar fleece throw blanket with brush fleece and matching stitching; thick but lightweight; 50"x 60"; imprint sized 4"x 4". Must be available in an array of colors such as navy, black, red, green, etc.

Per scarf: \$ 5.99

17. Gloves—Unisex styling 100% acrylic gloves; one size fits most. Must be available in an array of solid colors such as navy, black, red, green, etc.

Per pair \$ 3.69

18. Duffel Bags—Quality barrel duffel bag equivalent to UltraClub style number 8805; 600 denier polyester with color matched hardware and straps; diagonal webbing handle; detachable, adjustable shoulder strap; zippered main compartment; bag size is 18"w x 10"h; must be available in an array of colors such as navy, black, red, green, etc.

One Size Fits All: \$ 8.00

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19. Tote Bags—Quality tote made of 12-ounce cotton canvas; cross-stitched cotton webbed handles; 16" w x 14" h in size; imprint size of 8" w x 8" h; Must be available in solid colors such as blue, black, and red.

One Size Fits All: \$ 2.40

20. Drawstring Backpacks—Quality lightweight sports pack equivalent to UltraClub Sports Pac -k style number 8882; 210-denier nylon; matching durable drawstring; matching metal grommets; 15" w x 16" h max imprint/embroidery area; bag size is 17" w x 20" h; bag must be available in an array of colors such as navy blue, black, red, green, etc..

One Size Fits All: \$ 2.45

21. Face Masks—10 oz. 95% Cotton/ 5% Spandex cloth face covering that retains respiratory droplets and micron particles.

One Size Fits All: \$ 2.20

22. Screen Printing Costs, Front of Shirt:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$ 1.10 per garment
Two colors – screen printing \$.35 per garment
Three colors – screen printing \$.45 per garment
Four colors – screen printing \$.50 per garment
White underlay (flash) if needed \$ 0 per underlay

Screen Printing Costs, Back of Shirt:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$.25 per garment
Two colors – screen printing \$.35 per garment
Three colors – screen printing \$.45 per garment
Four colors – screen printing \$.50 per garment
White underlay (flash) if needed \$ 0 per underlay

Screen Printing Costs, Left Sleeve or Left Leg:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$ 1.70 per garment
Two colors – screen printing \$.35 per garment
Three colors – screen printing \$.45 per garment
Four colors – screen printing \$.50 per garment
White underlay (flash) if needed \$ 0 per underlay

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Screen Printing Costs for hats:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$ 2.50 per garment
Two colors – screen printing \$ 6.00 per garment
Three colors – screen printing \$ 7.00 per garment
Four colors – screen printing \$ 8.50 per garment
White underlay (flash) if needed \$ 0 per underlay

Screen Printing Costs for headbands, scarves, blankets, and gloves:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$ 1.59 per garment
Two colors – screen printing \$ 2.50 per garment
Three colors – screen printing \$ 3.00 per garment
Four colors – screen printing \$ 3.50 per garment
White underlay (flash) if needed \$ 0 per underlay

Screen Printing Costs for masks and all bags:

Set-up Costs (screen) \$ 0 per screen
One color – screen printing \$ 1.25 per bag
Two colors – screen printing \$.35 per bag
Three colors – screen printing \$.40 per bag
Four colors – screen printing \$.50 per bag
White underlay (flash) if needed \$ 0 per underlay

Screen Printing Costs for team numbers (up to 40 numbers), per garment:

Set-up Costs (screen) \$ 0 per screen
One side \$.40 per garment
Second side \$.50 per garment
White underlay (flash) if needed \$ 0 per underlay


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23. Embroidery Costs

Number of Stitches	Cost (based on the quantities below)			
	1-5 pcs.	6-24 pcs.	25-49 pcs.	50 & up
Up to 1000 stitches	3.00	3.00	3.00	3.00
1001 to 2000 stitches	4.00	4.00	4.00	4.00
2001 to 3000 stitches	4.50	4.50	4.50	4.50
3001 to 4000 stitches	5.00	5.00	5.00	5.00
4001 to 5000 stitches	5.25	5.25	5.25	5.25
5001 to 10,000	6.00	6.00	6.00	6.00
10,001 to 15,000	7.00	6.00	6.00	6.00
15,001 to 20,000	7.00	6.00	6.00	6.00
20,001 to 25,000	8.00	7.00	7.00	7.00
25,001 to 30,000	8.00	7.00	7.00	7.00
30,001 to 35,000	9.00	8.00	8.00	8.00
35,001 to 40,000	10.00	9.00	9.00	9.00
Full Back Stitch Count				
Up to 20,000	10.00			
20,001 to 22,500	12.00			
22,501 to 25,000	13.00			
25,001 to 27,500	14.00			
27,501 to 30,000	15.00			
30,001 to 32,500	15.00			
32,501 to 35,000	15.00			
35,001 to 37,500	15.00			

Company Name: Dot Designing Taxpayer ID Number: 208207602
 Address: 242 Possum Hollow Rd.
 City: Monroe Twp State: NS Zip: 08831
 Telephone Number: 732-656-1100 Fax: 732-656-0100 Email: dotdesigning@verizon.net
 Name of Bidder: Adi Nikitansky Title: owner
 Signature of Bidder: 

THIS FORM (7 PAGES) MUST BE COMPLETED, SIGNED AND RETURNED WITH YOUR BID



STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: DOT DESIGNING LIMITED LIABILITY COMPANY

Trade Name:

Address: 8 TRYALL BLVD
MONROE TWP, NJ 08831-5141

Certificate Number: 1300210

Effective Date: February 06, 2007

Date of Issuance: July 10, 2018

For Office Use Only:

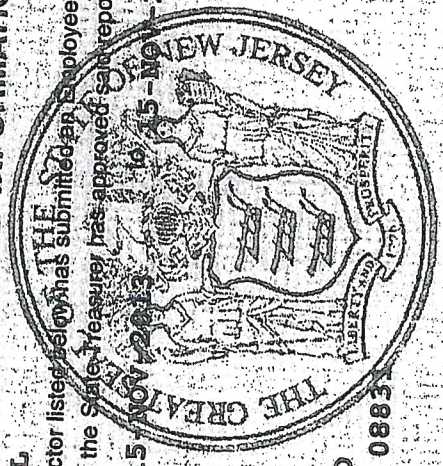
20180710073127366

Certification 51725

**CERTIFICATE OF EMPLOYEE INFORMATION REPORT
INITIAL**

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of

15 NOV 2013 16 25 NOV 2020



DOT DESIGNING
242 POSSUM HOLLOW ROAD
MONROE TWP. NJ 08831



[Handwritten signature]

Andrew P. Sidamon-Eristoff
State Treasurer

BID DOCUMENTS CHECKLIST

The following completed items must be submitted with your bid in order for your bid to be considered. Place a ✓ next to each number to indicate forms included.

- 1. ADDENDA ACKNOWLEDGEMENT (if applicable) FORM
- 2. AFFIRMATIVE ACTION QUESTIONNAIRE/EVIDENCE
- 3. AFFIRMATIVE ACTION LANGUAGE- EXHIBIT A
- 4. AMERICANS WITH DISABILITIES-EXHIBIT B
- 5. BID DOCUMENTS CHECKLIST
- 6. BID PROPOSAL FORM (7 PAGES)
- 7. BUSINESS REGISTRATION – New Jersey Department of Treasury (*if not submitted with bid, document must be submitted prior to contract award).
- 8. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTARY EXCLUSION
- 9. CERTIFICATION REGARDING LOBBYING
- 10. DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN
- 11. FORM W-9 (CURRENT IRS FORM)
- 12. GOALS AND TIMETABLES FOR MINORITIES AND WOMEN
- 13. NON-COLLUSION AFFIDAVIT
- 14. POLITICAL CONTRIBUTION DISCLOSURE FORM
- 15. STATEMENT OF OWNERSHIP
- 16. VENDOR'S AFFIDAVIT

I have read the above and complied with the given instructions.

AUTHORIZED SIGNATURE:  TITLE: Owner

COMPANY: Dot Designing

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

ACKNOWLEDGMENT OF RECEIPT OF ADDENDA

Screen Printed Items

Bid #21-005

The undersigned Bidder hereby acknowledges receipt of the following Addenda:

<u>Addendum Number</u>	<u>Dated</u>	<u>Acknowledge Receipt (Initial)</u>
<i>None</i>		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Acknowledged for: Dot Designing
Company Name

By: *[Signature]* - Adi Nikitansky
Name of Authorized Representative

[Signature]
Signature of Authorized Representative

Owner
Title

7-3-2020
Date

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID ONLY IF ADDENDA ISSUED

AFFIRMATIVE ACTION QUESTIONNAIRE / EVIDENCE

Screen Printed Items

Bid #21-005

EQUAL OPPORTUNITY REQUIREMENTS FOR CONTRACTORS WITH FIVE OR MORE EMPLOYEES

This form is to be completed and returned with the bid. However, the Board will accept in lieu of this Questionnaire Affirmative Action Evidence stapled to this page.

- 1. Our company has a Federal Affirmative Action Plan approval.

Yes No

If yes, a copy of said approval shall be submitted to the Board of Education within seven (7) working days of the notice intent to award the contract or the signing of the contract.

- 2. Our company has a New Jersey State Certificate of Approval.

Yes No

If yes, a copy of the valid and in effect New Jersey State Certificate (Certificate of Employee Information Report) shall be submitted to the Board of Education within seven (7) working days of the notice intent to award the contract or the signing of the contract.

- 3. If you answered **NO** to both questions above, you must apply for an Affirmative Action Employee Information Report (FORM AA-302). Please visit the New Jersey Department of Treasury website for the Division of Contracts Equal Employment Opportunity Compliance: www.state.nj.us/treasr/contractcompliance

- Click on "Employee Information Report"
- Complete and submit the form with the appropriate payment to:

Department of Treasury
Division of Purchasing & Property
Contract Compliance Audit Unit
EEO Monitoring Program
PO Box 206
Trenton, New Jersey 08625-0206

A copy shall be submitted to the Board of Education within seven (7) working days of the notice intent to award the contract or the signing of the contract.

A CONTRACTOR'S BID SHALL BE REJECTED AS NON RESPONSIBLE IF THE CONTRACTOR FAILS TO SUBMIT EITHER OF THE ABOVE DOCUMENTS OF EVIDENCE WITHIN THE TIME SPECIFIED.

ALL BIDDERS/ CONTRACTORS ARE REQUIRED TO COMPLY WITH THE REQUIREMENTS OF P.L. 10:5-31 et. seq. and P.L. 1975, C. 127 (NJAC 17:27).

I certify that the above information is correct to the best of my knowledge.

Name of Company Dot Designing

Name of Authorized Agent Adi Nalutinsky Title Owner

Signature [Signature] Date 7-3-2020

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Exhibit A

**MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) N.J.A.C. 17:27
GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval, **OR**
- Certificate of Employee Information Report, **OR**
- Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at http://www.state.nj.us/treasury/contract_compliance/).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

(REVISED 1/16)

Dot Designing
Company Name


Authorized Signature

7-3-2020
Date

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

EXHIBIT B

**AMERICANS WITH DISABILITIES ACT OF 1990
Equal Opportunity for Individuals with Disability**

The contractor and the Atlantic City Board of Education, (hereafter "owner") do hereby agree that the provisions of Title 11 of the Americans with Disabilities Act of 1990 (the "Act") (42 U.S.C. 5121 01 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant there unto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the *owner shall* expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Dot Designing



7-3-2020

Company Name

Authorized Signature

Date

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP
N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

Screen Printed Items

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This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: Dot Designing

Organization Address: 242 Possum Hollow Rd. Monroe Twp NJ 08831

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

Part II

The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

OR

No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Business Address
Adi Nikitovsky	1 Danno Dr. Monroe Twp NJ 08831

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP (continued)
N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

Screen Printed Items
 Bid #21-005


Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Business Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the **Atlantic City Board of Education** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the **Atlantic City Board of Education** to notify the **Atlantic City Board of Education** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the **Atlantic City Board of Education** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	<i>Ardi Nikitansky</i>	Title:	<i>Owner</i>
Signature:		Date:	<i>7-3-2020</i>

THIS FORM (2 pages) MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

NON-COLLUSION AFFIDAVIT

Screen Printed Items

Bid #21-005

STATE OF : New Jersey)

COUNTY OF: Middlesex)

I, Adi Nikitansky of Monroe Twp in the County

of Middlesex, State of New Jersey, of full age, being duly sworn according to the law on my oath, depose and say that:

I am owner of the firm of Dot Designing the bidder making the bid for the herein project, and that I executed said bid with full authority to do so, that said bidder has not directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive bidding in connection with the project named in this bid, and that all statements contained in said bid and in this Affidavit are true and correct, and made with full knowledge that the ATLANTIC CITY BOARD OF EDUCATION relies upon the truth of the statement contained in said bid and in the statements contained in this Affidavit in awarding the contract for said project.

I warrant that no requirement or commitment was made in reference to any political contribution to any party, person or elected official, and that no undisclosed benefits of any kind were promised to anyone connected with the ATLANTIC CITY BOARD OF EDUCATION or any political party in reference hereto.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, **EXCEPT** bona fide employees or bona fide established commercial or selling agencies maintained by:

Dot Designing

(Name of Contractor)

I further warrant and represent that I have never been convicted of or acknowledged or admitted to any payment of kickbacks or unlawful gifts to any government official, school board official or employee for which conduct the ATLANTIC CITY BOARD OF EDUCATION deems me disqualified from doing business with them under such circumstances.

I also understand that the above disqualification does not apply to any vendor who co-operates with the prosecution and gives supporting testimony on behalf of the prosecution in the course of a judicial inquiry.

SWORN AND SUBSCRIBED TO BEFORE ME

THIS 6th DAY OF July, 2020

[Signature]
(Signature of NOTARY PUBLIC)

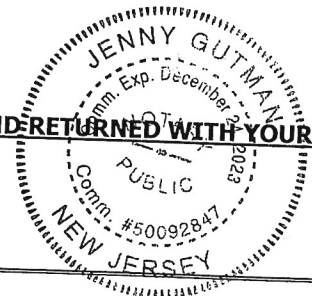
[Signature]
Signature of Affiant

NOTARY PUBLIC OF: New Jersey

Adi Nikitansky
Print/type name of Affiant

My Commission Expires: December 24, 2023

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



VENDOR'S AFFIDAVIT

Screen Printed Items

Bid #21-005

STATE OF : New Jersey)

COUNTY OF : Middlesex)

I, Adi Nikubnsky, of full age, being duly sworn according to the law on my oath, depose and say that:

I am Owner, (Officer/Partner/Owner) of the firm of:

Dot Designing

the Bidder making the bid for the herein project, and that I executed said bid with full authority to do so, and that all statements contained in said bid and in this Affidavit are true and correct and made with full knowledge that the ATLANTIC CITY BOARD OF EDUCATION relies upon the truth of the statement contained in said Bid and in the statements contained in this Affidavit in awarding the contract for said project.

I understand that this affidavit is being provided to the ATLANTIC CITY BOARD OF EDUCATION in compliance with the provisions of NJSA 18A:12-2 and NJSA 18A:6-8 which prohibit persons having a conflict of interest in entering into contracts or selling **textbooks, apparatus or supplies** to the Board of Education.

No person who is a shareholder, officer, director, partner or owner of the above vendor is officially connected with or employed in the ATLANTIC CITY PUBLIC SCHOOLS DISTRICT or is in any way pecuniarily or beneficially interested in or receives compensation or reward of any kind in connection with the sales of the vendor to the ATLANTIC CITY BOARD OF EDUCATION.

No member of the ATLANTIC CITY BOARD OF EDUCATION is employed or interested directly in the above vendor.

I further declare and certify that I and the company of which I am the agent, are not included on the State Treasurer's **List of Debarred, Suspended or Disqualified Bidders**.

I understand that if any statements made herein are false, I am subject to punishment and that any person who may be interested in my company while employed by the ATLANTIC CITY BOARD OF EDUCATION is subject to removal from office and to revocation of his/her certificate to teach or administer, direct or supervise instruction or educational guidance in the public school system.

SWORN AND SUBSCRIBED TO BEFORE ME

THIS 6th DAY OF July, 2020

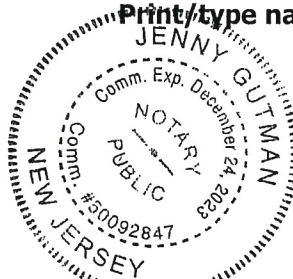
[Signature]
(Signature of NOTARY PUBLIC)

NOTARY PUBLIC OF: New Jersey

My Commission Expires: December 24, 2023

[Signature]
Signature of Affiant

Adi Nikubnsky
Print/type name of Affiant



THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

**Atlantic City Board of Education
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

BID/RFP SOLICITATION #: 21-005

VENDOR/BIDDER: Dot Designing

**PART 1:
CERTIFICATION**

**VENDOR/BIDDER MUST COMPLETE PART 1 BY CHECKING ONE OF THE BOXES.
FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.**

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Vendors/Bidders must review this list prior to completing the below certification. **Failure to complete the certification will render a Vendor's/Bidder's proposal non-responsive.** If the Director of the Division of Purchase and Property finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

CHECK THE APPROPRIATE BOX

A. I certify, pursuant to Public Law 2012, c.25, that neither the Vendor/Bidder listed above nor any of its parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). Disregard Par 2 and complete and singe the Certification below.

OR

B. I am unable to certify as above because the Vendor/Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Par 2 below and sing and complete the Certification below. Failure to provide such information will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2:

PLEASE PROVIDE ADDITIONAL LANGAGE INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

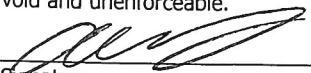
If you checked Box "B" above, provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in the investment activities in Iran by completing the boxes below.

ENTITY NAME: _____
RELATIONSHIP TO VENDOR/BIDDER: _____
DESCRIPTION OF ACTIVITIES: _____
DURATION OF ENGAGEMENT: _____
ANTICIPATED CESSATION DATE: _____
VENDOR/BIDDER CONTACT NAME: _____
VENDOR/BIDDER CONTACT PHONE NO.: _____

Attach Additional Sheets if Necessary.

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor/bidder, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor/Bidder is under a **continuing obligation** from the date of this certification through the completion of any contract(s) with the State to notify the State in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to **criminal prosecution** under the law, and it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.


Signature _____

7-3-2020
Date _____

Adi Mikhasky - Owner
Print Name and Title _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM


Required Pursuant to N.J.S.A. 19:44A-20.26

This form or its permitted facsimile must be submitted to the local unit no later than 10 days prior to the award of the contract.

Part I - Vendor Information

Vendor Name:	Dot Designing		
Address:	242 Possum Hollow Rd		
City:	Monte Twp	State: NJ	Zip: 08831

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.J.S.A. 19:44A-20.26 and as represented by the Instructions accompanying this form.

 Adi Nikitinsky Owner
 Signature Printed Name Title

I. Part II - Contribution Disclosure

Disclosure requirement: Pursuant to N.J.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$300 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
			\$
None			

Check here if the information is continued on subsequent page(s)

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Goals and Timetables for Minorities and Women

Screen Printed Items

Bid #21-005

Construction Projects ONLY


Please complete and sign:

- Applicable – Please provide goals and timetables; complete below
- Not Applicable – Check off and complete below

Name of Company: Dot Designing

Address: 242 Possum Hollow Rd.

City, State, Zip: Monroe Twp NJ 08831

Signature: 

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

CERTIFICATION REGARDING LOBBYING

Screen Printed Items
Bid #21-005

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance


The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Name of Company: Dot Designing

Name of Authorized Agent: Adi Nikichinsky

Title of Authorized Agent: owner

Signature of Authorized Agent:  Date 7-3-2020

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION—LOWER TIER COVERED TRANSACTIONS

Screen Printed Items
Bid #21-005

This certification is required by the Department of Education regulations implementing Executive Order 12549, Debarment and Suspension, 2 CFR 200.212, for all lower tier transactions meeting the threshold and tier requirements stated at Section 200.212.


Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled A Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Tier Covered Transactions without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to, check the Non-Procurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name of Applicant: Adi Nikitansky ^{Dot Designing} PR/Award Number and/or Project Name: Screen Printed Items
Printed Name of Authorized Representative: Adi Nikitansky
Title of Authorized Representative: Owner
Signature:  Date: 7-3-2020

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

SAMPLE DOCUMENT

Form **W-9**
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) <u>Dot Designs</u>	
	Business name/disregarded entity name, #different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (S=C corporation, S=S corporation, P=partnership) > <u>C</u> <input type="checkbox"/> Other (see instructions) >	
	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____	
Address (number, street, and apt. or suite no.) <u>242 Possum Hollow Rd.</u>		Requestor's name and address (optional)
City, state, and ZIP code <u>Monroe Twp NJ 08831</u>		
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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number								
2	0	-	8	2	0	7	6	0

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 on page 3.

Sign Here	Signature of U.S. person >	Date > <u>7-3-2020</u>
-----------	----------------------------	------------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. The IRS has created a page on irs.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

A CURRENT IRS W9 FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID