

**REQUEST FOR BID
PRINTING SUPPLIES
FOR
ILLINOIS VALLEY COMMUNITY COLLEGE
BID # BID2018-B01**

Illinois Valley Community College District No. 513 (the College) is accepting sealed bids for printing supplies, pursuant to specifications.

INSTRUCTIONS TO BIDDERS

Bids will be received and publicly read aloud in Room C-326, Illinois Valley Community College District No. 513, Oglesby, Illinois, at 10:00 A.M. on September 5, 2017. Bids received after this time will not be accepted and will be returned to you unopened. Faxed bids will not be accepted.

Electronic proposal submissions shall be considered a sealed document if they are received at the purchasing office by the time and date set herein for receipt of proposals. The vendor assumes the risk of premature disclosure due to submission in an unsealed form. Electronic proposals must be e-mailed to purchasing@ivcc.edu with the subject **PROPOSAL: Printing Supplies – BID2018-B01**.

Bids must be made in accordance with the instructions contained herein. Questions concerning this bid may be directed to the Purchasing Department at 815-224-0417. Bids shall be submitted on the forms furnished by the College in a sealed envelope, plainly marked with the Bidder's name and address. Submit all bids to:

**Illinois Valley Community College District No. 513
Purchasing Department – Room C343
815 Orlando Smith Road
Oglesby, Illinois 61348**

ACKNOWLEDGEMENT OF ADDENDA:

Signature of a company official on an original document shall be construed as acknowledgement of receipt of any and all addenda pertaining to this specific bid. Identification by number of addenda and date issued should be noted on all bids submitted. **FAILURE TO ACKNOWLEDGE RECEIPT OF ADDENDA ON BID SUBMITTED MAY RESULT IN DISQUALIFICATION OF BID.**

Bidders who obtain a copy of the proposal from the College web-site are responsible for any addenda issued.

BIDDING PROCEDURES:

No bid shall be modified, withdrawn, or canceled for sixty days after the bid opening date without the consent of the College's Board of Trustees.

Changes or corrections may be made in the bid documents after they have been issued and before bids are received. In such cases, the College will issue a written addendum describing the change or correction to all bidders of record. Such addendum shall take precedence over that portion of the documents concerned and shall become part of the bid documents. Except in unusual cases, addendum will be issued to reach the bidders at least five (5) days prior to the date established for receipt of bids.

Each bidder shall carefully examine all bid documents and all addenda thereto and shall thoroughly familiarize themselves with the detailed requirements thereof prior to submitting a bid. Should a bidder find discrepancies or omissions from documents, or should there be doubt as to the meaning, the bidder shall, at once, and in any event not later than ten (10) days prior to bid due date, notify the Director of Purchasing who will, if necessary, send a written addendum to all bidders. The College will not be responsible for any oral instructions. All inquiries shall be directed to the Director of Purchasing. After bids are received, no allowance will be made for an oversight by the bidder.

BID QUANTITIES:

The College reserves the right to increase or decrease, within reasonable limits, such quantities as need requires and at the unit price stated.

CLERICAL ERRORS:

If applicable, all errors in price extensions will be corrected by the College and totals for award determination corrected accordingly, unless the bidder specifies that no change be made in the total submitted. In this case, all incorrect price extensions will be noted at "lot", and award determination made on the basis of total price submitted.

SIGNATURE ON BIDS:

The College requires the signature on bid documents to be that of an authorized representative of said company. Each Bidder, by making her/his bid, represents that she/he has read and understands the bidding documents and that these instructions to bidders are a part of the specifications.

TAX EXEMPTION:

The College is exempt from paying Illinois Use Tax, Illinois Retailers Occupation Tax, Federal Excise Tax, and Municipal Retailer's Occupation Tax (Tax Exemption ID # E9995-5253-06)

AWARD CRITERIA:

As provided by statute, award will be based on the lowest and best (most advantageous to the College) as determined by consideration of:

1. Price offered
2. Quality of item offered
3. General reputation and performance capabilities of the bidder
4. Conformity with specifications herein
5. Delivery schedule
6. Suitability for intended use

As deemed in the best interest of the College, the College reserves the right to reject any and all bids or waive any minor irregularity or technicality in bids received.

BID AWARD:

The successful contractor, and/or any contractor, shall not proceed on this bid until it receives a purchase order from the College. Failure to comply is the risk of the contractor.

INVESTIGATION OF BIDDERS:

The College will make any necessary investigation to determine the ability of the bidder to fulfill the bid requirements. The College reserves the right to reject any bid if it is determined that the bidder is not properly qualified to carry out the obligation of the contract.

MANUAL AND WARRANTIES:

Product manuals and warranties shall be provided at time of delivery.

CERTIFICATION FORM:

Bidders must sign the enclosed Certification Form that refers to the Criminal Code of 1961 and to the Illinois Human Right Act dealing with Sexual Harassment. The signed Certification must be submitted with your bid. Failure to do so may result in the rejection of your bid.

EQUAL OPPORTUNITY EMPLOYMENT:

Respondent shall comply with the Illinois Human Rights Act, 775 ILCS 5/1-101 et seq., as amended, and any rules and regulations promulgated in accordance therewith, including, but not limited to, the Equal Opportunity Clause, Illinois Administrative Code, Title 44, Part 750 (Appendix A), which is incorporated herein by reference. In addition, the respondent shall comply with the Public Works Employment Discrimination Act, 775 ILCS 10/0.01 et seq., as amended. Furthermore, the respondent shall comply with Public Act 98-107, which requires nearly any party that contracts with a community college to post employment of vacancies with the state's job board: IllinoisJobLink.com.

LAW GOVERNING:

Any contract resulting from this RFP shall be governed by and construed according to the laws of the State of Illinois, without regard to conflict of law principles.

W-9 FORM:

Please complete the enclosed W-9 form and return with your bid.

Bid Form/Signature

Printing Supplies - Bid # BID2018-B01

Delivery is requested on an as-needed basis. **Delivery charges and all other charges must be included in your unit pricing.** Bid is for OEM products only. Remanufactured supplies will not be accepted. All prices, costs, and conditions outlined in the specifications shall remain fixed and valid for a term of **two (2)** years from the date of the bid award. The quantities listed are an annual estimate. Quantities may exceed or fall below quantity listed. **The College will not be held liable to purchase specified quantities.** The College reserves the right to award all supplies to one vendor or to multiple vendors depending upon what is considered to be in the best interest of the College.

The part number of each item quoted **MUST** be noted in the space provided on the Bid Form. If the College cannot identify an item due to lack of information, it reserves the right to reject that item. Your bid **MUST** include product warranty and guarantee of product information. If quotes are not submitted on the attached form, your description **MUST** match the original document.

| Item # | Printer | Toner | Color | Qty | Vendor Part # | Unit Cost | Total Cost |
|--------------------|-------------------------------------|---------|-------|-----|---------------|-----------|------------|
| 1 | HP Color Laser Jet MFP M477 | CF410A | Blk | 4 | | | |
| | | CF411A | Cyan | 4 | | | |
| | | CF412A | Ylw | 4 | | | |
| | | CF413A | Mag | 4 | | | |
| 2 | HP LaserJet Pro 400 color M451dn | CE410A | Blk | 2 | | | |
| | | CE411A | Cyan | 2 | | | |
| | | CE412A | Ylw | 2 | | | |
| | | CE413A | Mag | 2 | | | |
| 3 | HP Color Laser Jet 4025dn | CE260A | Blk | 4 | | | |
| | | CE261A | Cyan | 4 | | | |
| | | CE262A | Ylw | 4 | | | |
| | | CE263A | Mag | 4 | | | |
| 4 | HP Color Laser Jet 3800/3505x | Q6470A | Blk | 2 | | | |
| | | Q7581A | Cyan | 2 | | | |
| | | Q7582A | Ylw | 2 | | | |
| | | Q7583A | Mag | 2 | | | |
| 5 | HP Color Laser Jet 3525 | CE250X | Blk | 10 | | | |
| | | CE251A | Cyan | 8 | | | |
| | | CE252A | Ylw | 7 | | | |
| | | CE253A | Mag | 10 | | | |
| 6 | HP M426 FDN | CF226A | Blk | 3 | | | |
| 7 | HP 400 M425dn | CF280XD | Blk | 1 | | | |
| 8 | HP M602x | CE390X | Blk | 1 | | | |
| 9 | HP 700m 712 | CF214X | Blk | 1 | | | |
| 10 | HP 1200 | C7115A | Blk | 1 | | | |
| 11 | HP 3015/Pro MFP M521dn | CE255XD | Blk | 21 | | | |
| 12 | HP 4015 – **Dual Pack** | CC364XD | Blk | 5 | | | |
| 13 | HP 4200 – **Dual Pack** | Q1338D | Blk | 2 | | | |
| 14 | HP 4250 – **Dual Pack** | Q5942XD | Blk | 3 | | | |
| 15 | HP 5200 | Q7516A | Blk | 3 | | | |
| 16 | HP 9050 | C8543X | Blk | 1 | | | |
| 17 | HP 4015 **MICR** | CC346X | Blk | 1 | | | |
| Grand Total | | | | | | \$ | |

Submitted By:

Company

Authorized Signature

Address

Printed Name

City State Zip

Phone

Fax

E-Mail

Date

*If submitting more than one offer, please make copies of this Bid Form.
Submit one (1) offer per Bid Form

CERTIFICATION FORM

**TO: ILLINOIS VALLEY COMMUNITY COLLEGE DISTRICT NO. 513
OGLESBY, IL 61348**

Pertaining to the bid titled: Printing Supplies - Bid # BID2018-B01

I/We, as the Bidder certify that I/we have not been barred from bidding on this project as a result of a conviction for either bid-rigging or bid-rotating under *Article 33E* of the “*Criminal Code of 1961*”

We also do hereby certify that we have a written sexual harassment policy in place in full compliance with *Section 2-105 of the Illinois Human Rights Act* and will, upon request, be able to provide such written policy to the Department of Human Rights.

NAME OF CONTRACTOR/BIDDER

TITLE

DATE

THIS FORM MUST BE RETURNED WITH YOUR BID TO:

Illinois Valley Community College District No. 513
Purchasing Department – Room C343
815 North Orlando Smith Road
Oglesby, Illinois 61348

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. | 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; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <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) _____ <small>(Apply to accounts maintained outside the U.S.)</small> |
| | 5 Address (number, street, and apt. or suite no.) | | Requester's name and address (optional) |
| | 6 City, state, and ZIP code | | |
| | 7 List account number(s) here (optional) | | |

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| 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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table border="1" style="margin: auto;"> <tr><td colspan="9" style="text-align: center;">Social security number</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td colspan="3" style="text-align: center;">-</td><td colspan="3" style="text-align: center;">-</td><td colspan="3"></td></tr> <tr><td colspan="9" style="text-align: center;">OR</td></tr> <tr><td colspan="9" style="text-align: center;">Employer identification number</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td colspan="3" style="text-align: center;">-</td><td colspan="3" style="text-align: center;">-</td><td colspan="3"></td></tr> </table> | Social security number | | | | | | | | | | | | | | | | | | - | | | - | | | | | | OR | | | | | | | | | Employer identification number | | | | | | | | | | | | | | | | | | - | | | - | | | | | |
| Social security number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| OR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer identification number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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 ▶ _____ |
|------------------|----------------------------------|--------------|

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
 Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/w9.

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?* on page 2.

By signing the filled-out form, you:

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' shares 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. See *What is FATCA reporting?* on page 2 for further information.