514 Glover Street Marietta, GA 30060 Telephone: (770) 426-3300

www.cobbk12.org

One Team, One Goal: Student Success **Procurement Services Department** 

February 18, 2021

#### TO ALL VENDORS:

Cobb County School District (CCSD) invites bids for furnishing any and all goods and/or services required for "Invitation for Bid (IFB) B2116, Copier Supplies" as described in this document.

The CCSD Procurement Services Department General Terms and Conditions are hereby acknowledged, understood, and agreed to by the parties and are hereby fully incorporated into the solicitation document and the resulting contract. Refer to the CCSD Procurement Services website for the complete General Terms and Conditions. Go to <a href="https://www.cobbk12.org">www.cobbk12.org</a>. From this screen, select "Menu", select "Departments", choose "Procurement Services" and find the link to "General Terms and Conditions" located in the center of the page.

Vendors are instructed to read carefully all terms, conditions, specifications and requirements in this IFB. Vendors are required to complete and return forms in their entirety.

Bids must be submitted electronically via email to <a href="mailto:daphe.farley@cobbk12.org">daphe.farley@cobbk12.org</a> with "IFB B2116, Copier Supplies" referenced in the subject line.

The bid submittal deadline is <u>March 4, 2021 at 3:00 p.m. Eastern Time</u>. Please allow ample time for delivery. Please allow ample time for delivery. IFB responses submitted after the due date/time will not be accepted, however, bids can be submitted prior to the due date/time.

The bid opening will be held via Zoom on <u>March 4, 2021 at 3:00 p.m.</u> <u>Eastern Time.</u> In order to participate please click on the Zoom Link below or cut and paste into your browser:

https://cobbk12-org.zoom.us/j/94747749516?pwd=MU45TU1PU3hsR2VkbHR0SEJWUjNLZz09

CCSD reserves the right to accept or reject any or all bids and to waive any informalities.

Your interest and participation in the CCSD solicitation process is appreciated.

Sincerely,

David Odom, CPPO

**Director of Procurement Services** 

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The Special Terms and Conditions are customized specifically to this solicitation. Taking exception to these terms and conditions or submitting conflicting language may be cause for rejection of vendor's response.

Should these Special Terms and Conditions be in conflict with the General Terms and Conditions, the Special Terms and Conditions shall control.

### 1.0 PURPOSE

The Cobb County School District (CCSD) is seeking bids from qualified vendors for the purchase of Copier Supplies for Toshiba Copiers. Individual schools and central office departments will purchase items on an as needed basis. Quantities will vary depending on need. Annual expenditures are estimated to be approximately \$80,000.00.

### 2.0 SPECIFICATIONS AND REQUIREMENTS

- 2.1 All items shall be guaranteed to perform to the manufacturers' Original Equipment Manufacturer (OEM) specifications and to the satisfaction of the CCSD. Specific brands/models are requested on the Bid Form (Attachment A). No substitutions will be allowed, ONLY OEM items will be accepted.
- 2.2 Any item found defective, shall be replaced free of charge. Defective items shall be replaced, or monies refunded within five (5) calendar days after the vendor is notified.
- **2.3** Recycled or third-party products will not be accepted.
- 2.4 If an awarded item is discontinued, it is the vendor's responsibility to notify CCSD. Until the CCSD is notified, the item(s) will remain on the CCSD contract list for schools to place orders and the vendor shall fulfill that order at the original awarded price with the manufacturer's direct replacement or a model satisfactory to the CCSD, regardless of any manufacturer price increase.
- 2.5 Due to the CCSD adding copiers to their fleet and model/part number changes, items may be added or deleted from this contract.

#### 2.6 Delivery Requirements:

- **2.6.1** Awarded vendor(s) must deliver within seven (7) days from receipt of order unless otherwise specified.
- **2.6.2** All deliveries must be shipped to individual schools and departments as specified on the purchase order. Inside delivery is required for all orders.

### 3.0 WARRANTY

Unless otherwise stated, all items must include standard manufacturer's warranty. Upon request, vendors must provide a copy of product warranty statements.

#### 4.0 CALENDAR OF EVENTS

EVENT	DATE (dates are tentative)
Release IFB	February 18, 2021
Deadline for written questions	February 25, 2021 @ 10:00 a.m. ET
Responses to questions posted on CCSD website	February 26, 2021
IFB due electronically to Procurement Services by	March 4, 2021 @ 3:00 p.m. ET
Evaluation	March 2021
Award	March 2021

#### 5.0 COMMUNICATIONS WITH CCSD STAFF

- All communications concerning this IFB must be submitted in writing by email to daphne.farley@cobbk12.org. Only written questions submitted via email will be accepted. No response other than written, distributed by the Procurement Services Department, will be binding upon CCSD. The Procurement Services Department, in its discretion, may call upon user departments for clarification in their area of expertise. Questions concerning this solicitation must be received by 10:00 a.m. on February 25, 2021. Answers will be posted to the CCSD Current Solicitations website by February 26, 2021.
- 5.2 From the issue date of this IFB until completion of the entire solicitation process and announcement of award notification, all vendor communication must be authorized by the Procurement Services Department including, but not limited to, communications with school system employees and/or contracted agents related to this IFB. Violation of this provision may result in rejection of the vendor's response.
- 5.3 It is the vendor's responsibility to check the CCSD Current Solicitations website for any addenda, responses to vendor questions, or other communications that may be issued or released during the solicitation period. Following receipt of vendor responses to a solicitation, it is the vendor's responsibility to be available via email and/or phone during the review process in the event clarification or additional information is required. If clarification or additional information is requested, the responsibility rests on the vendor to ensure that CCSD receives requested information prior to the deadline(s) indicated.

### 6.0 **SUBMISSION OF RESPONSES**

- Responses must be on the forms furnished within this IFB and completed in their entirety. Bids must be submitted electronically by email to <a href="mailto:daphne.farley@cobbk12.org">daphne.farley@cobbk12.org</a> with "IFB B2116, Copier Supplies" referenced in the subject line of the email. PDF format is acceptable unless otherwise stated.
- 6.2 Vendors are instructed to carefully read all terms, conditions and specifications as set forth in the IFB. Responses must be either typed or written in ink. Any correction made within the IFB submission (white out or strike through) must be initialed by an authorized representative of the company submitting the bid or the bid may be rejected by CCSD.
- 6.3 All responses submitted become the property of the CCSD and are subject to applicable open records policies and laws.
- A hard copy of the <u>original Bid</u> may be requested at a later date. If requested, it will be mailed to the Cobb County School District, Attention: Procurement Services Department, Suite D, 6975 Cobb International Blvd., Kennesaw, Georgia 30152. The bids will be opened and read at the time and place set forth in the IFB via Zoom.
- 6.5 Any response received after the designated time will be deemed late and will not be considered by the CCSD. CCSD is not responsible for the failure of any computer hardware, software, or other communications systems or devices
- 6.6 Response should be in electronic format; PDF format is acceptable unless otherwise stated. Electronic files should be named and submitted as follows:
  - **6.6.1** Bid Form (pricing), saved as: Bid Form, Company Name (**submit in Excel Format**)
  - **6.6.2** Required documents and forms, saved as: Required documents, Company Name
- **6.7** Submit the following documents with your response:
  - **6.7.1** Vendor Questionnaire
  - **6.7.2** IRS W-9 Form
  - 6.7.3 Vendor Reference Form
  - **6.7.4** Georgia Security and Immigration Compliance Act Forms
  - **6.7.5** Disclosure of Lobbying Activities Form (if applicable)
  - **6.7.6** Acknowledgement and Agreement Form

### **7.0 COST**

- 7.1 Unless specifically consented to in writing by CCSD, prices must remain firm for a period of one year from the award date, or for any renewal period, under the same terms and conditions as the IFB. The CCSD reserves the option to renew any contract award at its sole discretion.
- **7.2** Quantities/amounts shown in the IFB are estimates. Vendors are advised that the actual number purchased/required may vary from those in the IFB, depending upon the needs of the CCSD and the availability of funds.
- **7.3** Responses that contain minimum order amounts will not be accepted unless called for in the solicitation document.
- **7.4** Pricing must be submitted on the Bid Form(s) as requested without conditions unless called for in the solicitation document.
- **7.5** For Goods: Responses for goods must include any and all delivery and/or installation charges. Delivery and/or installation requirements will be as specified in the solicitation document.
- **7.6** Prompt payment discounts will be considered for the purposes of evaluation and award.
- 7.7 The CCSD does not pay late payment fees, interest or attorneys' fees.
- 7.8 CCSD requests that vendors have the ability to accept procurement (credit) cards and purchase orders. Pricing must reflect this and remain firm with no additional charges for using either method. The successful vendor(s) will be responsible for providing usage reports and procurement card activity reports quarterly or upon request by CCSD.

### 7.9 FEE STRUCTURE FOR ADDITIONAL ITEMS

Within this document, CCSD has attempted to anticipate and identify all items that may be needed under this contract throughout the length of the award period. In the event CCSD has failed to include an item(s), responding vendors are asked to provide a fee structure for additional, related items that may be purchased during the award period. Vendors are to identify the pricing source and the associated fee structure in the space provided on the Bid Form. Some example responses are: X% discount below MSRP; X% discount below published catalog pricing; Cost plus X% mark-up. Upon request, awarded vendor must be able to provide documentation verifying appropriate discounts are granted throughout the

contract. CCSD reserves the right to conduct periodic random audits of fair market value, etc. to ensure price granted is reasonable and accurate.

#### 8.0 INSURANCE REQUIREMENTS

- **8.1** Commercial General Liability with limits of at least \$1 million. Coverage must include products and completed operations with reporting of claims on occurrence basis.
- **8.2** Commercial Auto Liability with limits of at least \$1 million.
- **8.3** Umbrella Coverage in excess of GL and Auto of at least \$2 million.
- **8.4** Statutory Workers' Compensation.
- **8.5** Employer's Liability of at least \$100,000.
- **8.6** Vendor's insurance carrier must have financial size category of at least **V**.

Cobb County School District must be named as an additional insured on all applicable policies. The insurance carriers should be licensed to do business in the state of Georgia. The carriers must have an AM Best rating of A- or higher

#### Please Note:

- Signing of Acknowledgement and Agreement signifies that vendor complies with insurance requirements as specified.
- Proof of Insurance is not required with submission of bid but must be available upon request including during the evaluation process. CCSD will require proof of insurance before issuance of Award Letter/Contract.
- Vendor may choose to include proof of insurance with submission of bid in order to expedite the evaluation process and issuance of award to the successful vendor.
- After notification of pending award, a vendor not including proof of insurance with their bid will be given not more than five (5) business days (including day of notification) to provide proof or the bid will be deemed non-responsive.

### 9.0 <u>ESCALATION/DE-ESCALATION CLAUSE</u>

All prices offered shall be firm against any increase for one (1) year from the effective date of the contract. Prior to renewal, CCSD may entertain a request for escalation in accordance with the most recently published **Producer Price Index** at the time of the request. For the purposes of this section, **PPI Index** (**PCU333316333316 Photographic** 

and photocopying equipment mfg.) as published by the United States Department of Labor, Bureau of Labor Statistics will be the benchmark. CCSD reserves the right to accept or reject the request for a price increase and, if appropriate, to utilize other resources in evaluating escalation requests. CCSD may entertain a request for escalation during the contract period if the current market conditions and prices at the time of the request have changed significantly. Documentation may be requested by CCSD that provides detail information about the change in market conditions and prices. If the price change is approved, the price will remain firm for 365 days from the date of the increase unless otherwise stated in the renewal award letter. This clause also enables CCSD to seek de-escalation on the basis of the same cited index, terms, and other resources.

#### **10.0 AWARD**

- 10.1 The CCSD reserves the right to accept or reject any part of a submitted response, to accept the entire response from one vendor, to accept portions of the response from several vendors, or to reject all responses submitted or to waive any minor irregularity. The CCSD reserves the right to award the bid under the most beneficial economic terms for the CCSD.
- **10.2** Award will be made to the responsive and responsible vendor based on price, availability, lead-time, past vendor experience, references, and compliance with the IFB specifications and requirements as outlined in this solicitation.

### 11.0 <u>VENDOR QUESTIONNAIRE</u>

Com	pany Name:
1.	How long has your company been in the business of providing copier supplies for Toshib Copiers?
2.	Provide background information on your company.
3.	Have you done business with other school systems? Yes□ No □  If yes, name system and volume of business
4.	Is the vendor willing to extend all pricing, terms and conditions quoted to any Cob County governmental entity under the Intergovernmental Cooperative Purchasin Program? This includes the Cobb County Government, the Cities of Acworth, Austel Kennesaw, Marietta, Powder Springs, Smyrna, the Devereux Foundation School, an Cobb County Charter Schools. (While these schools are not a part of Cobb County School District, they do provide services to students and receive pass-through funds from the State when appropriate.) Yes
5.	Can CCSD employees purchase from this bid at the same price? Yes $\ \square$ No $\ \square$
6.	Are any goods, excluding instructional materials or beverages for immediat consumption, purchased under this solicitation made in the State of Georgia?
	Yes □ No □ NA □
	If yes, please identify by product name and provide written verification as required by School District.
7.	Provide complete contact information for a point of contact DURING EVALUATION period This person must be available to answer any questions pertaining to your response that may arise prior to award. If no information is provided below, the information on the Acknowledgement and Agreement form will be used.
	Company Name:
	Contact Name:
	Phone Number: Fax Number:
	Email Address:

8. Provide complete contact information for each of the following. If no information is provided below, the information on the Acknowledgement and Agreement Form will be used. NOTE: An IRS W-9 form should be submitted with response.

Service	Service Representative This person will be responsible for answering CCSD questions related to products, billing issues, etc. during term of contract.							
Compa	any Name:							
Addre	SS:							
City:			State:				Zip:	
Contac	ct Name:							
Teleph	ione:			Fa	ax:			
Contac	ct Email:						<b>-</b>	
		P	urchase Ord	ler Ad	ddre	ess		
Addre	ss:							
City:			State:				Zip:	
Contac	ct Name:							
Teleph	ione:			Fa	ax:			
Contac	ct Email:			•				
Indicat	te whether purd email.	chase orders ar	e to be sent	via		Fax or	- ☐ Ema	il (preferred)
PO Fax	к:		PO Email A	ddres	ss:			
		Pa	ayment (Ren	nit) A	ddr	ess		
Addre	ss:							
City:			State:				Zip:	
Contac	ct Name:							
Teleph	ione:			Fa	ax:			
Contac	Contact Email:							
Checks	Checks should be made payable to:							

12.0	REFERENCES (Provide your company references):	
		Insert Your Company Name

ALL responding vendors must provide references for your company below. It is the vendor's responsibility to provide complete and accurate reference information on the form below; completing ALL fields. Failure to do so can result in CCSD being unable to verify vendor's past work, which may affect CCSD's determination that the vendor is responsive and responsible. Preference may be given to references of similar size and scope. Do not list CCSD as a reference. CCSD reserves the right to consider past experience with vendor.

Company/Entity:		
Address:		
Telephone:	Fax:	
Contact:	Contact Email:	
Provide a brief description of services/goods provided including dates.		
Company/Entity:		
Address:		
Telephone:	Fax:	
Contact:	Contact Email:	
Provide a brief description of services/goods provided including dates.		
Company/Entity:		
Address:		
Telephone:	Fax:	
Contact:	Contact Email:	
Provide a brief description of services/goods provided including dates.		

#### **CONFLICT OF INTEREST**

### ALL PROSPECTIVE VENDORS PLEASE READ CAREFULLY

Please refer to Board Policy BHA, Conflict of Interest, located on the Cobb County School District website at <a href="www.cobbk12.org">www.cobbk12.org</a> select **Menu**, then select **About**, then select **Board**, then select **Policies and Rules**, then select **Section B** and choose **BHA**.

Any conflict with Board policy and/or administrative rules must be disclosed at the time of bid submission.

#### **BOARD MEMBERS:**

Randy Scamihorn, Chairman

David Banks, Vice Chairman

**David Chastain** 

Charisse Davis

Jaha Howard

Leroy Tre' Hutchins

**Brad Wheeler** 

#### **EXECUTIVE CABINET:**

Chris Ragsdale, Superintendent

Dr. Kevin Daniel

John Floresta

Sherri Hill

**Brad Johnson** 

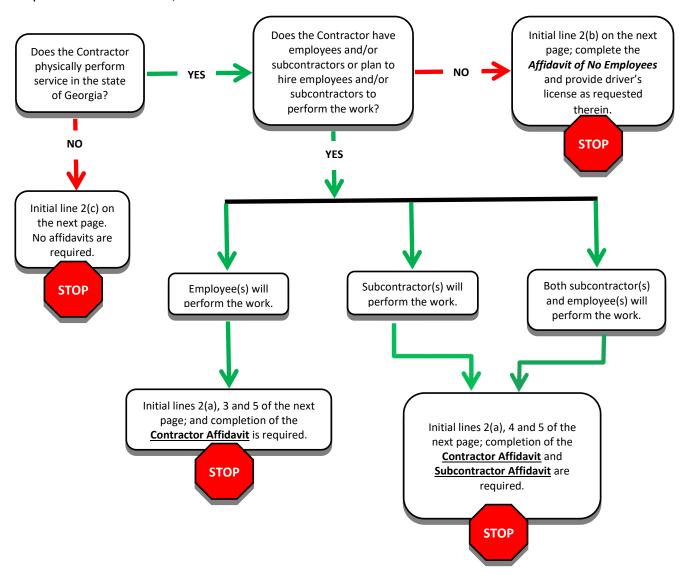
Jennifer Lawson

Marc Smith

Keeli Bowen

### Determine how to comply with the GA Security & Immigration Compliance Act

This section of the Agreement is related to the Georgia Security and Immigration Compliance Act, O.C.G.A. § 13-10-90 *et seq*. The chart below may assist the Contractor in determining which affidavit(s) must be provided as a provision of entering into this Agreement. If in doubt as to whether a document should be completed and submitted, it is recommended that the Contractor submit the information.



### GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT OF 2006, AS AMENDED BY THE ILLEGAL IMMIGRATION REFORM ACT OF 2011, OCGA 13-10-90, ET SEQ.

#### TO ALL PROSPECTIVE CONTRACTORS:

If you are providing services to the Cobb County School District, this completed document, as well as the applicable Georgia Security and Immigration Compliance forms and affidavits referenced herein must be completed, signed, notarized and submitted with your bid, proposal or contract

pro	posal or contract.
1)	The Cobb County School District shall comply with the Georgia Security and Immigration Compliance Act, as amended, O.C.G.A. § 13-10-90 et seq.
2)	In order to ensure compliance with the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603 and the Georgia Security and Immigration Compliance Act of 2006, as amended by the Illegal Immigration Reform Act of 2011, O.C.G.A. § 13-10-90 et seq. (collectively the "Act") the contractor ("Contractor") MUST INITIAL the statement applicable to Contractor below:
	(a) (Initial here) Contractor represents and warrants that Contractor has registered at https://e-verify.uscis.gov/enroll/ to verify information of all new employees in order to comply with the Act; is authorized to use and uses the federal authorization program; and will continue to use the authorization program throughout the contract period. Contractor further represents, warrants and agrees that it shall execute and return any and all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-101 et seq. in accordance with the terms thereof; (Complete and submit the Contractor Affidavit and Agreement); OR
	(b)(Initial here) Contractor represents and warrants that it has <u>no employees</u> and does not intend to hire employees to perform contractual services, and that Contractor has therefore provided a <u>U.S. state-issued driver's license or ID card</u> in lieu of an affidavit and that such license or ID card was issued by a State that <u>verifies lawful immigration status before issuing the</u> <u>license or ID card</u> . If my status changes I will, before hiring any employees, immediately notify the School District in writing and provide all affidavits required under the Act. (Complete and submit the Affidavit of No Employees); OR
	(c)(Initial here) Contractor represents and warrants that it <u>does not physically perform any service within the State of Georgia</u> as defined in the Act and thus does not have to comply with the foregoing Georgia law.
3) _	(Initial here) Contractor will not employ or contract with any subcontractor in connection with a covered contract unless the subcontractor is registered, is authorized to use, and uses the federal work authorization program and provides Contractor with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-101 et seq.
4) _	(Initial here) Contractor covenants and agrees that, if Contractor employs or contracts with any subcontractor in connection with the covered contract under the Act and DOL Rule 300-10-102, then in such event Contractor will secure from each subcontractor at the time of the subcontract, the subcontractor's name and address, the employer identification number/taxpayer identification number applicable to the subcontractor; the date the authorization to use the federal work authorization program was granted to subcontractor; the subcontractor's attestation of the subcontractor's compliance with the Act and Georgia Department of Labor Rule 300-10-12.; and the subcontractor's agreement not to contract with subcontractors unless the subcontractor is registered, authorized to use, and uses the federal work authorization program; and provides subcontractor with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-101 et seq. (Complete and submit the Subcontractor Affidavit and Agreement)
5)_	(Initial here) Contractor agrees to provide the Cobb County School District with all affidavits of compliance as required by the Act and Georgia Department of Labor Rule 300-10-102, 300-10-103, 300-10-107 and 300-10-108 within five (5) business days of its receipt of any such documents.
6 <u>)</u>	(Initial here) Contractor is a foreign company and therefore not required to provide the affidavit as required by the Act.  Contractor must comply with any other laws required to perform services in the United States, including but not limited to having an appropriate visa.
Со	mpany Name:

### CONTRACTOR AFFIDAVIT PROVIDED PURSUANT TO O.C.G.A. § 13-10-91(b)(2)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91 stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with the Cobb County School District, has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor covenants that it will continue to use the federal work authorization program throughout the contract period, that the undersigned contractor will contract for the physical performance of services in the performance of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b), and that the contractor shall forward any subcontractor's affidavit to the School District within five (5) days of its receipt of the same.

Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

EEV User Identification N (4 to 7 Digit Number)	umber 			
Date of Authorization				
Contractor/Company Na	me			
Email Address			_	
Telephone Number				
I hereby declare under penalty of perju	ry that the foregoing is t	rue and correct.		
Executed on	, 20in		_ (city),	(state).
Signature of Authorized Officer or Ager	nt .			
Printed Name of Authorized Officer or A	Agent	Title of Authorized	Officer or Agent	
NOTARY INFORMATION				
Sworn to before me this day of		, 20	Affix Notarial Sea	l Here
Notary Public Signature				
My Commission Expires:				

### COBB COUNTY SCHOOL DISTRICT MARIETTA, GEORGIA PROCUREMENT SERVICES DEPARTMENT GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

### SUBCONTRACTOR AFFIDAVIT PURSUANT TO O.C.G.A. § 13-10-91(b)(3)

,	rporation which is	s engaged in t	he physical	performance of service	1 stating affirmatively that the es under a contract with ool District, has registered with
program, in accordance undersigned subcontract period, that the undersig only with sub-subcontract	uses the federal work with the applicable for covenants that it ned subcontractor w ctors who present an tor shall forward any	authorization prog le provisions an will continue to u will contract for the affidavit to the su	gram commonl d deadlines e use the federal physical perfo ubcontractor w	y known as E-Verify, or stablished in O.C.G.A. § work authorization progrmance of services in the th the information requi	any subsequent replaceme 13-10-91. Furthermore, the gram throughout the contraperformance of such contrared by O.C.G.A. § 13-10-91(bold) ol District within five (5) da
Subcontractor hereby atte	ests that its federal wo	ork authorization us	ser identification	n number and date of auth	orization are as follows:
EEV User Ide (4 to 7 Digit Nu	entification Number mber)				
Date of Auti	norization				
Subcontract	or/Company Name				
Email Addre	ss				
Telephone N	lumber				
I hereby declare under per				(city),	(state).
Signature of Authorized O	fficer or Agent	_			
Printed Name of Authorize	ed Officer or Agent	_	Title of Autho	orized Officer or Agent	
NOTARY INFORMATION				Affix Notarial	Seal Here
Sworn to before me this _	day of		, 20		
Notary Public Signature					
My Commission Expires:					

### AFFIDAVIT OF NO EMPLOYEES PURSUANT TO O.C.G.A. § 13-10-91(b)(5)

The undersigned, in connection with a proposed contract or subcontract with the Cobb County School District (the "School District") for the physical performance of service in the State of Georgia (the "Contract"), hereby affirms and certifies under penalties of perjury that:

- (a) I am a sole proprietor.
- (b) I do not employ any other persons.
- (c) I do not intend to hire any employees to perform the Contract.
- (d) A true, correct and complete copy of my driver's license is attached hereto.
- (e) If at any time hereafter I determine that I will need to hire employees to satisfy or complete the physical performance of services under the Contract, then <u>before</u> hiring any employees, I will:
  - (i.) immediately notify the School District and all higher tier contractors (if any) in writing; and
  - (ii.) register with, participate in and use, a federal work authorization program operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986, P.L. 99-603, in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-90; and
  - (iii.) Provide the School District with all affidavits required by O.C.G.A. § 13-10-90 *et seq*. and Georgia Department of Labor Rule 300-10-1-.01 *et seq*.

Print Company Name / Name of Sole Proprietor		
BY: Signature of Authorized Officer/Agent	Date	
NOTARY INFORMATION		Affix Notarial Seal Here
Sworn to before me this day of	, 20	
Notary Public Signature	_	
My Commission Expires:	_	

[Attach copy of driver's license]

### COBB COUNTY SCHOOL DISTRICT MARIETTA, GEORGIA PROCUREMENT SERVICES DEPARTMENT DISCLOSURE OF LOBBYING ACTIVITIES

#### INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime federal recipient, at the initiation or receipt of a covered federal action, or a material change to a previous filing pursuant to Title 31 U.S.C. Section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity 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 a covered federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- Identify the type of covered federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered federal action.
- 2. Identify the status of the covered federal action.
- 3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered federal action.
- 4. Enter the full name, address, city, state and zip code of the reporting entity. Include congressional district, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the first tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in Item 4 checks "subawardee", then enter the full name, addressee, city, state and zip code of the prime federal recipient. Include congressional district, if known.
- 6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
- 7. Enter the federal program name or description for the covered federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grant, cooperative agreements, loans, and loan commitments.
- 8. Enter the most appropriate federal identifying number available for the federal action identified in Item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application proposal control number assigned by the federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- 9. For a covered federal action where there has been an award or loan commitment by the federal agency, enter the federal amount of the award/loan commitment for the prime entity identified in Item 4 or 5.
- 10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in Item 4 to influence the covered federal action.
  - (b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter last name, first name, and middle initial.
- 11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (Item 4) to the lobbying entity (Item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
- 12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
- 13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
- 14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with federal officials. Identify the federal official(s) or employee(s) contacted or the officer(s), employee(s), or member(s) of Congress that were contacted.
- 15. Check whether or not a Continuation Sheet(s) is attached.
- 16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

FORM (Rev. 5/17)

# COBB COUNTY SCHOOL DISTRICT MARIETTA, GEORGIA PROCUREMENT SERVICES DEPARTMENT DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See bottom for public burden disclosure.)

4.	Type of Federal Action:  a. Contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance  Name and Address of Reporting Entity:  Prime	oplication d	3. Report Type:  a. initial filing b. material change  For Material Change Only:     year quarter     date of last report  orting Entity in No. 4 is a Subawardee, Enter Name and Addressne:
Cons	gressional District, if known:	Congressiona	al District, if known:
6.	Federal Department/Agency:	7. Federal NSLP	Il Program Name/Description: SBP SFSP SMP CACFP  eral Domestic Assistance (CFDA) Number, if applicable:
8.	Federal Action Number, if known:	9. Award /	Amount, if known:
10.	a. Name and Address of Lobbying Entity (if individual, last name, first name, Middle initial):	10.a.) (last na	tuals Performing Services (including address if different from No. arme, first name, middle initial):
	(Attach Continuation Sheet(	1	
12.	Amount of Payment (check all that apply):  \$ actual planned  Form of Payment (check all that apply):  a. cash b. in-kind; specify: nature  value	a. b. c. d. e. f.	f Payment (check all that apply):  retainer  one-time fee  commission  contingent fee  deferred  other, specify:
14.	Brief description of Services Performed or to be Performed and D for Payment indicated in 11:  (attach Continuation S		
15.	Continuation sheet(s) attached: Yes No	]	A, II Hecessary)
16.	Information requested through this form is authorized by title 31 U.S.C. sec This disclosure of lobbying activities is a material representation of fact upor reliance was placed by the tier above when this transaction was made or einto. This disclosure is required pursuant to 31 U.S.C. 1352. This informareported to the Congress semi-annually and will be available for public inspany person who fails to file the required disclosure shall be subject to a civil of not less than \$10,000 and not more than \$100,000 for each such failure	on which significant contents of the content c	ignature: rint Name: itle:
		Te	elephone No.: Date:
Fede	ral Use Only:		Authorized for Local Reproduction

FORM (Rev. 5/17)

### **ACKNOWLEDGEMENT AND AGREEMENT**

#### **Invitation for Bid B2116, Copier Supplies**

This acknowledgement and agreement must be properly signed and firmly attached to your IFB response. The acknowledgement becomes a part of your IFB response and without it your IFB response is not complete and will be subject to rejection.

I, the undersigned, have carefully examined and fully understand both the CCSD General Terms and Conditions and this solicitation in their entirety and agree to conform with every requirement. I certify that I am authorized to sign this bid for the vendor. I further acknowledge that failure to prepare, submit, or execute this bid in the exact manner requested will be just cause to reject any or all of my bid submission.

Withdrawals, cancellations, etc., will not be accepted unless authorization is given by the Director of Procurement Services. In the event vendor fails to comply, they may be removed from the vendors' list.

Failure to respond using the most recent forms/information posted to the CCSD Current Solicitations website may be cause for rejection. It is the vendor's responsibility to check the CCSD Current Solicitations website for any addenda, responses to vendor questions, or other communications, which may be necessary during the solicitation period. Vendor acknowledges and incorporates each applicable Addendum number listed below in their response:

Check all that apply: Addendum No. 1 \_\_\_\_\_, Addendum No. 2 \_\_\_\_, Addendum No. 3 \_\_\_\_\_

Addendum No. 4, No Addenda	
Prices must remain firm as specified on the award	I notification letter
Company Name	Representative's Name (type or print)
Address	Representative's Signature (must be signed in ink)
City, State, and Zip Code	E-Mail Address
Date	Telephone Number and Extension
Terms (Net 30 days unless early payment discount is submitted and accepted by the CCSD.)	Fax Number

Signing the Acknowledgement and Agreement affirms that the original Invitation for Bid document has not been altered in any way.

### "NO BID" REPLY FORM

It is CCSD's desire to notify all potential vendors; however, we do not want to send notifications to those vendors who may no longer be interested in participating in the CCSD solicitation process.

If you choose not to respond to this IFB, please complete this form and return via email to:

daphne.farley@cobbk12.org
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Thank you for your cooperation.

### "NO BID" REPLY FORM: IFB B2116, Copier Supplies

I hereby submit a "NO BID" to this Invitation for Bid for the reason(s) checked below:

Specifications were unclear or restrictive.	7. Do not offer the goods or services requested.
2. Could not meet bonding requirements.	8. Cannot supply at this time.
Our schedule will not permit us to respond.	9. Cannot meet delivery schedule.
Terms & Conditions were unclear or restrictive.	10. Other/Remarks:
5. Could not meet specifications.	
6. Could not meet insurance requirements.	

I wish to remain on CCSD's vendor list for the	se goods/services:	Yes	No	
Vendor	Represe	ntative		_

### **IFB CHECKLIST**

### **IFB B2116, Copier Supplies**

We encourage you to save paper. It is not necessary to return this entire document with your bid response. Please return only the relevant pages on which your company has included a response.

This checklist is intended to aid in preparation and submission of vendor's bid response. It may not be all-inclusive. Responsibility rests upon the vendor to ensure all information requested within this document is provided.

Submitted Vendor Questionnaire
IRS W-9 Form (October 2018 Rev.)
Submitted Vendor Reference Sheet
Submitted Applicable Georgia Security and Immigration Compliance Act OCGA 13-10-90 documents signed by an authorized company representative
Submitted Disclosure of Lobbying Activities: — signed by an authorized company representative. Mark N/A on Form if it does not apply
Submitted Acknowledgment and Agreement – signed by an authorized company
representative
Bid Form

### **School List**

### **ELEMENTARY SCHOOLS**

School Name	Phone	Address	City, Zip	Fax
Acworth	770.975.6600	4220 Cantrell Road	Acworth, 30101	770.975.6602
Addison	770.578.2700	3055 Ebenezer Road	Marietta, 30066	770.578.2702
Argyle	678.842.6800	2420 Spring Road	Smyrna, 30080	678.842.6802
Austell	770.819.5804	5600 Mulberry Street	Austell, 30106	678.398.0041
Baker	770.975.6629	2361 Baker Road, NW	Acworth, 30101	770.975.6631
Bells Ferry	678.594.8950	2600 Bells Ferry Road	Marietta, 30066	678.594.8952
Belmont Hills	678.842.6810	605 Glendale Place	Smyrna, 30080	678.842.6812
Big Shanty	678.594.8023	1575 Ben King Road	Kennesaw, 30144	678.594.8026
Birney	678.842.6824	775 Smyrna-Pwdr Sprgs St.	Marietta, 30060	678.842.6826
Blackwell	678.494.7600	3470 Canton Road	Marietta, 30066	678.494.7602
Brumby	770.916.7070	815 Terrell Mill Rd. SE	Marietta, 30067	770.916.7072
Bryant	770.819.2402	6800 Factory Shoals Road	Mableton, 30126	770.819.2404
Bullard	678.594.8720	3656 Old Stilesboro Road	Kennesaw, 30152	678.594.8727
Chalker	678.494.7621	325 North Booth Road	Kennesaw, 30144	678.494.7623
Cheatham Hill	678.594.8034	1350 John Ward Road SW	Marietta, 30064	678.594.8036
City View	770-819-2553	285 South Gordon Road	Mableton, 30126	770-819-2643
Clarkdale	770.819.2422	4725 Ewing Road	Austell, 30106	770.819.2424
Clay – Harmony Leland	770.819.0736	6326 Factory Shoals Rd	Mableton, 30126	
Compton	770.222.3700	3450 New Macland Road	Pwdr Sprgs, 30127	770.222.3702
Davis	678.494.7636	2433 Jamerson Road	Marietta, 30066	678.494.7638
Dowell	678.594.8059	2121 West Sandtown Road	Marietta, 30064	678.594.8061
Due West	678.594.8071	3900 Due West Road	Marietta, 30064	678.594.8073
East Side	770.578.7200	3850 Roswell Road	Marietta, 30062	770.578.7202
Eastvalley	770.578.7214	2570 Lower Roswell Road	Marietta, 30067	770.578.7216
Fair Oaks	678.594.8080	407 Barber Road	Marietta, 30060	678.594.8082
Ford	678.594.8092	1345 Mars Hill Road	Acworth, 30101	678.594.8094
Frey	770.975.6655	2865 Mars Hill Road	Acworth, 30101	770.975.6657
Garrison Mill	770.642.5600	4111 Wesley Chapel Road	Marietta, 30062	770.642.5602
Green Acres	678.842.6905	2000 Gober Avenue	Smyrna, 30080	678.842.6907
Hayes	678.594.8127	1501 Kennesaw-Due W. Rd.	Kennesaw, 30152	678.594.8129
Hendricks	770.819.2387	5243 Meadows Road	Pwdr Spgs, 30127	770.819.2389
Hollydale	678.594.8143	2901 Bay Berry Drive	Marietta, 30008	678.594.8145
Keheley	678.494.7836	1985 Kemp Road	Marietta, 30066	678.494.7838
Kemp	678.594.8158	865 Corner Road	Pwdr Sprgs, 30127	678.594.8160
Kennesaw (K-2)	678.594.8172	3155 Jiles Road	Kennesaw, 30144	678.594.8174
Kincaid	770.578.7238	1410 Kincaid Road	Marietta, 30066	770.578.7240
King Springs	678.842.6944	1041 Reed Road	Smyrna, 30082	678.842.6946
LaBelle	678.842.6955	230 Cresson Drive	Marietta, 30060	678.842.6957
Lewis	770.975.6673	4179 Jim Owens Road	Kennesaw, 30152	770.975.6675
Mableton	770.819.2513	5220 Church Street	Mableton, 30126	770.819.2515
McCall (K-1)	770 975-6775	4496 Dixie Avenue	Acworth, 30101	770.529-1580
Milford	678.842.6966	2390 Austell Road	Marietta, 30008	678.842.6968
Mount Bethel	770.578.7248	1210 Johnson Ferry Road	Marietta, 30068	770.578.7250
Mountain View	770.578.7265	3151 Sandy Plains Road	Marietta, 30066	770.578.7267
Murdock	770.509.5071	2320 Murdock Road	Marietta, 30062	770.509.5217
Nicholson	770.928.5573	1599 Shallowford Road	Marietta, 30066	770.928.5575
Nickajack	678.842.5814	4555 Mavell Road SE	Smyrna, 30082	678.842.5832

### **School List**

#### **ELEMENTARY SCHOOLS cont.**

School Name	Phone	Address	City, Zip	Fax
Norton Park	678.842.5833	3041 Gray Road	Smyrna, 30082	678.842.5835
Pickett's Mill	770-975.7172	6400 Old Stilesboro Road	Acworth, 30101	770.975.7121
Pitner	678.594.8320	4575 Wade Green Road	Acworth, 30101	678.594.8319
Powder Springs	770.222.3746	4570 Grady Grier Drive	Pwdr Sprgs, 30127	770.222.3748
Powers Ferry	770.578.7936	403 Powers Ferry Road	Marietta, 30067	770.578.7938
Riverside	770.819.5851	461 South Gordon Road	Mableton, 30126	678.398.0040
Rocky Mount	770.591.5050	2400 Rocky Mountain Road	Marietta, 30066	770.591.5041
Russell	770.437.5937	3920 South Hurt Road	Smyrna, 30082	770.437.5939
Sanders	770.819.2568	1550 Anderson Mill Road SW	Austell, 30106	770.819.2570
Sedalia Park	770.509.5162	2230 Lower Roswell Road	Marietta, 30068	770.509.5342
Shallowford Falls	770.642.5610	3529 Lassiter Road	Marietta, 30062	770.642.5612
Smyrna	678.842.6741	1099 Fleming Street	Smyrna, 30080	678.842.6749
Sope Creek	770.916.7085	3320 Paper Mill Road	Marietta, 30067	770.916.7087
Still	678.594.8287	870 Casteel Road	Pwdr Sprgs, 30127	678.594.8289
Teasley	770.437.5945	3640 Spring Hill Parkway	Smyrna, 30080	770.437.5947
Timber Ridge	770.642.5621	5000 Timber Ridge Road	Marietta, 30068	770.642.5623
Tritt	770.642.5630	4435 Post Oak Tritt Road	Marietta, 30062	770.642.5632
Varner	770.222.3775	4761 Gaydon Road	Pwdr Sprgs, 30127	770.222.3777
Vaughan	678.594.8298	5950 Nichols Road	Pwdr Sprgs, 30127	678.594.8300

### MIDDLE SCHOOLS

School Name	Phone	Address	City, Zip	Fax
Awtrey	770.975.6615	3601 Nowlin Road	Kennesaw, 30144	770.975.6617
Barber	770.975.6764	4222 Cantrell Road	Acworth, 30101	770.529.0325
Campbell	678.842.6873	3295 S. Atlanta Road	Smyrna, 30080	678.842.6875
Cooper	770.819.2438	4605 Ewing Road	Austell, 30106	770.819.2440
Daniell	678.594.8048	2900 Scott Road	Marietta, 30066	678.594.8050
Dickerson	770.578.2710	855 Woodlawn Drive	Marietta, 30068	770.578.2712
Dodgen	770.578.2726	1725 Bill Murdock Road	Marietta, 30062	770.578.2728
Durham	770.975.6641	2891 Mars Hill Road NW	Acworth, 30101	770.975.6643
East Cobb	770.578.2740	825 Terrell Mill Rd. SE	Marietta, 30067	770.578.2742
Floyd	770.819.2453	4803 Floyd Road	Mableton, 30126	770.819.2455
Garrett	770.819.2466	5235 Austell-Pwdr Sprgs Rd.	Austell, 30106	770.819.2468
Griffin	678.842.6917	4010 King Springs Rd.	Smyrna, 30082	678.842.6919
Hightower Trail	770.578.7225	3905 Post Oak Tritt Road	Marietta, 30062	770.578.7227
Lindley - 6th Grade	770.819.2414	1550 Pebblebrook Circle	Mableton, 30126	770.819.2418
Lindley - 7th & 8th	770.819.2496	50 Veterans Mem. Highway	Mableton, 30126	770.819.2498
Lost Mountain	678.594.8224	700 Old Mountain Road	Kennesaw, 30152	678.594.8226
Lovinggood	678.331.3015	3825 Luther Ward Road	Pwdr Sprgs, 30127	678.331.3016
Mabry	770.928.5546	2700 Jims Road	Marietta, 30066	770.928.5548
McCleskey	770.928.5560	4080 Maybreeze Road	Marietta, 30066	770.928.5562
McClure	678.331.8131	3660 Old Stilesboro Road	Kennesaw, 30152	678.331.8132
Palmer	770.591.5020	690 North Booth Road	Kennesaw, 30144	770.591.5032
Pine Mountain	678.594.8252	2720 Pine Mountain Circle	Kennesaw, 30152	678.594.8254
Simpson	770.971.4711	3340 Trickum Road	Marietta, 30066	770.971.4507
Smitha	678.594.8267	2025 Powder Springs Road	Marietta, 30064	678.594.8269
Тарр	770.222.3758	3900 Macedonia Road	Pwdr Sprgs, 30127	770.222.3760

### **School List**

#### **HIGH SCHOOLS**

School Name	Phone	Address	City, Zip	Fax
Allatoona	770.975.6503	3300 Dallas-Acworth Hwy NW	Acworth, 30101	770.529.7744
Campbell	678.842.6850	5265 Ward Street	Smyrna, 30080	678.842.6852
Cobb Horizon	678.594.8240	1765 The Exchange SE	Atlanta, 30339	678.331.8309
Harrison	678.594.8104	4500 Due West Road	Kennesaw, 30152	678.594.8106
Hillgrove	678.331.3961	4165 Luther Ward Road	Pwdr Sprgs, 30127	678.331.8128
Kell	678.494.7844	4770 Lee Waters Road	Marietta, 30066	678.494.7846
Kennesaw Mountain	678.594.8190	1898 Kennesaw-Due W. Road	Kennesaw, 30152	678.594.8192
Lassiter	678.494.7863	2601 Shallowford Road	Marietta, 30066	678.494.7865
McEachern	770.222.3710	2400 New Macland Road	Pwdr Sprgs, 30127	770.222.3712
North Cobb	770.975.6685	3400 Old 41 Highway, North	Kennesaw, 30144	770.975.6687
Osborne	770.437.5900	2451 Favor Road	Marietta, 30060	770.437.5902
Pebblebrook	770.819.2521	991 Old Alabama Road	Mableton, 30126	770.819.2523
Pope	770.578.7900	3001 Hembree Road	Marietta, 30062	770.578.7902
South Cobb	770.819.2611	1920 Clay Road	Austell, 30106	770.819.2613
Sprayberry	770.578.3200	2525 Sandy Plains Road	Marietta, 30066	770.578.3202
Walton	770.578.3225	1590 Bill Murdock Road	Marietta, 30062	770.578.3227
Wheeler	770.578.3266	375 Holt Road	Marietta, 30068	770.578.3268

### **SPECIAL SCHOOLS AND PROGRAMS**

School Name	Phone	Address	City, Zip	Fax
Adult Education Center	678.594.8011	1595 Hawthorne Ave.	Smyrna, 30080	678.594.8015
Brown Professional Lrng. Ctr.	678-842-6930	3265 Brown Road	Smyrna, 30080	
Cobb Mentoring Matters	678.581.6811	514 Glover St., Ste. 180 E	Marietta, 30060	678.594.8731
Cobb Virtual Academy	678.581.6791	1595 Hawthorne Ave	Smyrna, 30080	
Corporate Classroom	770.590.4506	514 Glover Street	Marietta, 30060	
Devereaux Ackerman Academy	770.427.0147	1291 Stanley Road	Kennesaw, 30152	
Early Learning Center	770-819-2483	5891 Dodgen Rd SW	Mableton, 30126	
ESOL	770.426.3410	1870 Teasley Drive	Smyrna, 30080	
H.A.V.E.N. at Sky View	770.819.2584	5805 Dunn Road	Mableton, 30126	770.819.2586
Homeless Ed. (Rose Garden)	678.503.0173	1870 Teasley Drive	Smyrna, 30080	770.437.5935
International Welcome Center	678.331.3086	1870 Teasley Drive	Smyrna, 30080	
Title I (Rose Garden)	770.437.5933	1870 Teasley Drive	Smyrna, 30080	

### OTHER CCSD FACILITIES

OTTILIN CCOD LACILITIES			
School Name	Phone	Address	City, Zip
440 Glover St. (Financial Services)	770.426.3310	440 Glover St.	Marietta, 30060
514 Glover St. (Central Office)	770.426.3300	514 Glover St.	Marietta, 30060
560 Glover St. (Maintenance)	770.426.3355	560 Glover St.	Marietta, 30060
Argo Maintenance	770.803.2100	4885 Argo Road	Smyrna, 30082
Baker Bus Shop	770.975.6714	2351 Baker Road	Acworth, 30101
Campus PD & Warehouse	770.426.3355	650 South Cobb Drive	Marietta, 30060
Concert Hall at Lassiter HS	770.514.2515	2601 Shallowford Road	Marietta, 30066
Events Office	678.594.8120	4500 Due West Road (Suite 240)	Kennesaw, 30152
Hawthorne Center	678.842.6930	1595 Hawthorne Avenue	Smyrna, 30080
Human Resources – Glover St.	770.514.3894	580 Glover St.	Marietta, 30060
Kennesaw Warehouse	770.590.4523	6975 Cobb International Blvd.	Kennesaw, 30152
Mars Hill Bus Shop	770.975.6719	2891 Mars Hill Road	Acworth, 30101
Rose Garden	678.503.0180	1870 Teasley Drive	Smyrna, 30080
Sanders Bus Shop	770.222.6291	3826 Sanders Road	Pwdr Sprgs, 30127
South Cobb Bus Shop/Transportation	770.429.5860	620 South Cobb Dr.	Marietta, 30060