



514 Glover Street  
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[www.cobbk12.org](http://www.cobbk12.org)

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

**February 22, 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) B2117, Document Conversion Services** 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 [www.cobbk12.org](http://www.cobbk12.org). 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 [gary.blount@cobbk12.org](mailto:gary.blount@cobbk12.org) with **“IFB B2117, Document Conversion Services”** referenced in the subject line.

The bid submittal deadline is **March 8, 2021 at 3:00 p.m. Eastern Time**. 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 **March 8, 2021 at 3:00 p.m. Eastern Time** <https://cobbk12-org.zoom.us/j/91846361076?pwd=c1A3eWJKM2JQUU1DYINJK1RCVzN2UT09>

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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BOARD OF EDUCATION

Randy Scamihorn, *Chair* • David Banks, *Vice Chair*  
Jaha Howard • Leroy Tre' Hutchins • David Chastain • Charisse Davis • Brad Wheeler

SUPERINTENDENT

Chris Ragsdale

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COBB COUNTY SCHOOL DISTRICT  
MARIETTA, GEORGIA  
PROCUREMENT SERVICES DEPARTMENT

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SPECIAL TERMS AND CONDITIONS

**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**

CCSD Records Management is seeking a qualified vendor to provide - to provide Document Conversion Services to include scanning, microfilming, and digitation for the CCSD Record Management Office, located at 6975 Cobb International Blvd, Kennesaw, Georgia 30152.

**2.0 SCOPE OF WORK**

- 2.1** Vendor shall, perform scanning and indexing of paper records, conversion of the scanned digital image to microfilm with indexing and conversion of existing microfilm images to digital format with indexing.
- 2.2** Most records are protected by Family Educational Rights and Privacy Act (FERPA) and will be considered confidential to protect the privacy of students and family.
- 2.3** Scanning/microfilming of annual student records consists of approximately 320,000 documents from 111 schools for inactive (withdrawals) and graduate files.
- 2.4** Digitation of up to 1400 rolls of microfilm. Initial project will consist of approximately 600 rolls of microfilm to be converted to digital, as budget allows.
- 2.5** All processes must include quality assurance of scanned/converted images.

**3.0 MINIMUM REQUIREMENTS**

- 3.1** Paper records will be scanned at 200-300 dpi in portrait mode, blank pages eliminated programmatically, deskewed, despeckled and cropped.
- 3.2** A separate index file will be provided in a pipe-delimited format to allow import into a document management program.

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- 3.3 All microfilm conversions will be performed in accordance with ANSI/AAIM MS 23-1998; practices for operational procedures/inspection and quality of first-generation silver gelatin microfilm of documents.
- 3.4 Original microfilm will be 215 ft., 16mm and 35mm anti-halation undercoated safety film, meeting all requirements of ANSI ph 1.15-1976 and Georgia Micrographic Standards.
- 3.5 Original and processed microfilm will meet or exceed archival requirements as set forth by the National Bureau of Standards.
- 3.6 Must be able to complete each project within 90 calendar days of receipt of documents/rolls.
- 3.7 It is preferred that all operations will be performed within the metro Atlanta area, but will consider vendors within 350 miles with secure, company-operated transportation. **No offshore contracting is allowed.**

**4.0 PREPARATION**

- 4.1 CCSD staff will be responsible for the preparation of all documents for filming, including the removal of staples, paper clips, binders, tape, straightening corners of documents, etc. (vendor may be responsible for the removal of these items if missed by CCSD staff.)
- 4.2 Vendor will be responsible for removing any smaller size document(s) on the original document, only if it interferes with the readability of the original document. Those small documents will be taped to an 8.5 x 11 piece of paper and filmed separately.

**5.0 CERTIFICATION/TECHNICAL TARGETS - MICROFILM**

The following certification and technical targets will be filmed on each roll of microfilm:

- 5.1 Beginning of roll targets:
  - 5.1.1 Certificate of authenticity
  - 5.1.2 Resolution test targets
  - 5.1.3 Density target
  - 5.1.4 Start of roll/declaration of intent and purpose

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**5.2** End of roll target:

**5.2.1** Certificate of authenticity

**5.2.2** Density target

**5.2.3** Resolution test target

**5.3** Camera reduction ratio for documents will be 24x.

**5.4** Original microfilm density will be maintained between .90-1.20 and resolution will be a minimum of 150 lines per minute (LPM).

**6.0** **SCANNED IMAGES TO MICROFILM**

**6.1** All images must be blipped, sequentially numbered, de-speckled, de-skewed and enhanced for readability.

**6.2** All scanned deliverables must be in multi-page format. For example, a student folder has 10 pages, all pages must be individual pages to allow individual printing.

**6.3** Vendor must write all images and corresponding indices to an agreed upon medium for delivery.

**6.4** Invoiced charges must be based on the actual number of images scanned and keystrokes keyed.

**7.0** **CONVERSION OF MICROFILM TO DIGITAL FORMAT**

**7.1** Vendor prices will include the secure transportation of original rolls of films to and from CCSD.

**7.2** Vendor will provide for the digitizing of rolls of film in an indexed format (PDF), and for index file, pipe delimited to enclose a column that has the delimiter in it. Each line in the file must contain a full path to the file that it is referencing.

**7.3** Vendor must write all images and corresponding indices to an agreed upon medium for delivery.

**7.4** Invoiced charges must be based on actual number of images scanned and keystrokes keyed.

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**8.0 DATA ENTRY/INDEXING**

- 8.1** Vendor shall provide data entry per keystroke for indexing of individual files.
- 8.2** Vendor shall provide data entry per keystroke for conversion of microfilm to CD/DVD or agreed upon medium.
- 8.3** Vendor shall provide data entry per keystroke for conversion of electronic images or agreed upon medium to microfilm.
- 8.4** Vendor shall provide data entry – indexing at no charge for data merged from existing database.
- 8.5** CCSD will provide database of student information to assist with indexing. This may be changed to accommodate the District’s needs. Additional documents will be provided which will contain an inventory of boxes with pertinent information and name lists, which can be used as cross reference when indexing.
- 8.6** Indexes of all scanned files will include school year, school, student ID, last name, first name, DOB. This information will be available from the database, the individual files or from other files provided at time of pick up.
- 8.7** Images will be written to microfilm with an agreed upon format and must have a corresponding electronic index file for all names on each roll for retrieval purposes.
- 8.8** Images created from existing microfilm will be indexed by roll to include school year, school, student ID, last name, first Name, DOB.

**9.0 LEGIBILITY/READABILITY**

- 9.1** After processing each roll of microfilm, image-by-image inspection, density and resolution readings are required to assure legibility and readability. Scanned images are compared to originals.
- 9.2** Vendor shall re-film or re-scan all unreadable images due to operator error or equipment malfunction at no charge.
- 9.3** Vendor shall quality check each CD/DVD for readability and after the images have been written to the CD/DVD.

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**10.0 PICKUP/DELIVERY**

- 10.1** Vendor must provide pickup service for all documents to be scanned or original rolls of film for digitizing.
- 10.2** Vendor must provide delivery service of original roll film containers to Records Management office.
- 10.3** Vendor must provide diazo duplicate rolls for daily retrieval use with typed “from – to” index labels on numbered roll film, type “M” cartridge.
- 10.4** Vendor must provide delivery service of diazo duplicate roll film containers or CD/DVDs and associated files to Records Management office. Final quality control and review will be deemed completed after Records Management has quality checked and reviewed the roll film or digital format to make sure the images were properly converted to microfilm or digital format.
- 10.5** Vendor must provide CCSD 24-hour access to records during the conversion process. Retrieval time must not exceed 30 minutes for faxing or sending secure drop box requests to Records Management office.

**11.0 SECURITY**

- 11.1** The microfilming and holding facilities must be monitored during the time records are exposed. At all other times the records must be secured in a locked area.
- 11.2** Vendor must put all documents back into container after filming and ensure all documents are placed in the correct sequence.
- 11.3** Vendor must provide ph neutral containers to house the original film with typed “from – to” index labels on roll film containers.
- 11.4** Vendor must provide storage of record boxes after film has been processed, for a time not to exceed 90 days.
- 11.5** Vendor must return the records in the original containers with transmittal logs to CCSD Records Management.
- 11.6** Trained and bonded personnel will perform all work at the vendor’s facilities.
- 11.7** Vendor is liable for the re-creation for any lost film while in possession or during transport, at no cost to the District.

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**12.0 CALENDAR OF EVENTS**

EVENT	DATE (dates are tentative)
Release IFB	February 22, 2021
Deadline for written questions	March 1, 2021 by 11:00 a.m. E. T.
Responses to questions posted on CCSD website	March 2, 2021
IFB due in Procurement Services by	March 8, 2021 by 3:00 p.m. E.T.
Evaluation	March 2021
Award	March 2021

**13.0 COMMUNICATIONS WITH CCSD STAFF**

- 13.1** All communications concerning this IFB must be submitted in writing by email to the CCSD Procurement Services Department. Email to [gary.blount@cobbk12.org](mailto:gary.blount@cobbk12.org) is the preferred method of communication. 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 11:00 a.m. E.T., March 1, 2021. Answers will be posted to the CCSD Current Solicitations website by March 2, 2021.**
- 13.2** 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.
- 13.3** 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.



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**14.0 SUBMISSION OF RESPONSES**

- 14.1** Responses must be on the forms furnished within this IFB and completed in their entirety. Bids must be submitted electronically by email to [gary.blount@cobbk12.org](mailto:gary.blount@cobbk12.org) with “**IFB B2117, Document Conversion Services**” referenced in the subject line of the email. PDF format is acceptable unless otherwise stated.
- 14.2** Vendors are instructed to read all terms, conditions and specifications as set forth in the IFB carefully. 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.
- 14.3** All responses submitted become the property of the CCSD and are subject to applicable open records policies and laws.
- 14.4** A hard copy of the **original Bid** 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.**
- 14.5** 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
- 14.6 Response should be in electronic format; PDF format is acceptable unless otherwise stated. Electronic files should be named and submitted as follows:**
- 14.6.1** Bid Form (pricing), saved as: Bid Form, Company Name
  - 14.6.2** Required documents and forms, saved as: Required documents, Company Name
- 14.7** Submit the following documents with your response:
- 14.7.1** Vendor Questionnaire
  - 14.7.2** IRS W-9 Form
  - 14.7.3** Vendor Reference Form
  - 14.7.4** Georgia Security and Immigration Compliance Act Forms
  - 14.7.5** Disclosure of Lobbying Activities Form (if applicable)
  - 14.7.6** Acknowledgement and Agreement Form

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**15.0 COST**

- 15.1** 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.
- 15.2** 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.
- 15.3** Responses that contain minimum order amounts will not be accepted unless called for in the solicitation document.
- 15.4** Pricing must be submitted on the Bid Form(s) as requested without conditions unless called for in the solicitation document.
- 15.5** 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.
- 15.6** Prompt payment discounts will be considered for the purposes of evaluation and award.
- 15.7** The CCSD does not pay late payment fees, interest or attorneys' fees.
- 15.8** **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.
- 15.9** **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

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

**15.10 HOURLY RATE FOR ADDITIONAL SERVICES** Within this document, CCSD has attempted to anticipate and identify all services that may be needed under this contract throughout the length of the award period. In the event CCSD has failed to anticipate all service needs, responding vendors are asked to provide a fee structure for additional, related services that may be needed during the award period. Vendors are to provide an hourly rate in the space provided on the Bid Form. If awarded the contract, this fee would then apply to service needs that may be identified at a later date. If there are different rates, please provide any/all rate information.

**16.0 INSURANCE REQUIREMENTS**

- 16.1** Commercial General Liability with limits of at least \$1M. Coverage must include products and completed operations with reporting of claims on an occurrence basis.
- 16.2** Commercial Auto Liability with limits of at least \$1M.
- 16.3** Umbrella Coverage in excess of GL and Auto of at least \$2M.
- 16.4** Statutory Workers' Compensation
- 16.5** Employer's Liability of at least \$100K.
- 16.6** 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.

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- 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.

**17.0 AWARD**

- 17.1** 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.
- 17.2** 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.

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**18.0 VENDOR QUESTIONNAIRE**

Company Name: \_\_\_\_\_

1. Please provide address and description of security of the facility the files will be processed. \_\_\_\_\_  
\_\_\_\_\_

2. How long has your company been in the business of providing the microfilming and digitizing services? \_\_\_\_\_

Provide background information on your company. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please provide a brief summary of your company's plan to process each project (If additional space is needed, include on separate sheet). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you done business with other school systems? Yes  No   
If yes, name system and volume of business \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Is the vendor willing to extend all pricing, terms and conditions quoted to any Cobb County governmental entity under the Intergovernmental Cooperative Purchasing Program? This includes the Cobb County Government, the Cities of Acworth, Austell, Kennesaw, Marietta, Powder Springs, Smyrna, the Devereux Foundation School, and 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  No

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6. 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:			

7. 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.**

<b>Service Representative</b>	This person will be responsible for answering CCSD questions related to products, billing issues, etc. during term of contract.			
Company Name:				
Address:				
City:		State:		Zip:
Contact Name:				
Telephone:		Fax:		
Contact Email:				
<b>Purchase Order Address</b>				
Address:				
City:		State:		Zip:
Contact Name:				
Telephone:		Fax:		
Contact Email:				
Indicate whether purchase orders are to be sent via fax or email.			<input type="checkbox"/> Fax or <input type="checkbox"/> Email	
PO Fax:		PO Email Address:		

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<b>Payment (Remit) Address</b>					
Address:					
City:		State:		Zip:	
Contact Name:					
Telephone:		Fax:			
Contact Email:					
Checks should be made payable to:					

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**19.0 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.			



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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 [www.cobbk12.org](http://www.cobbk12.org) 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

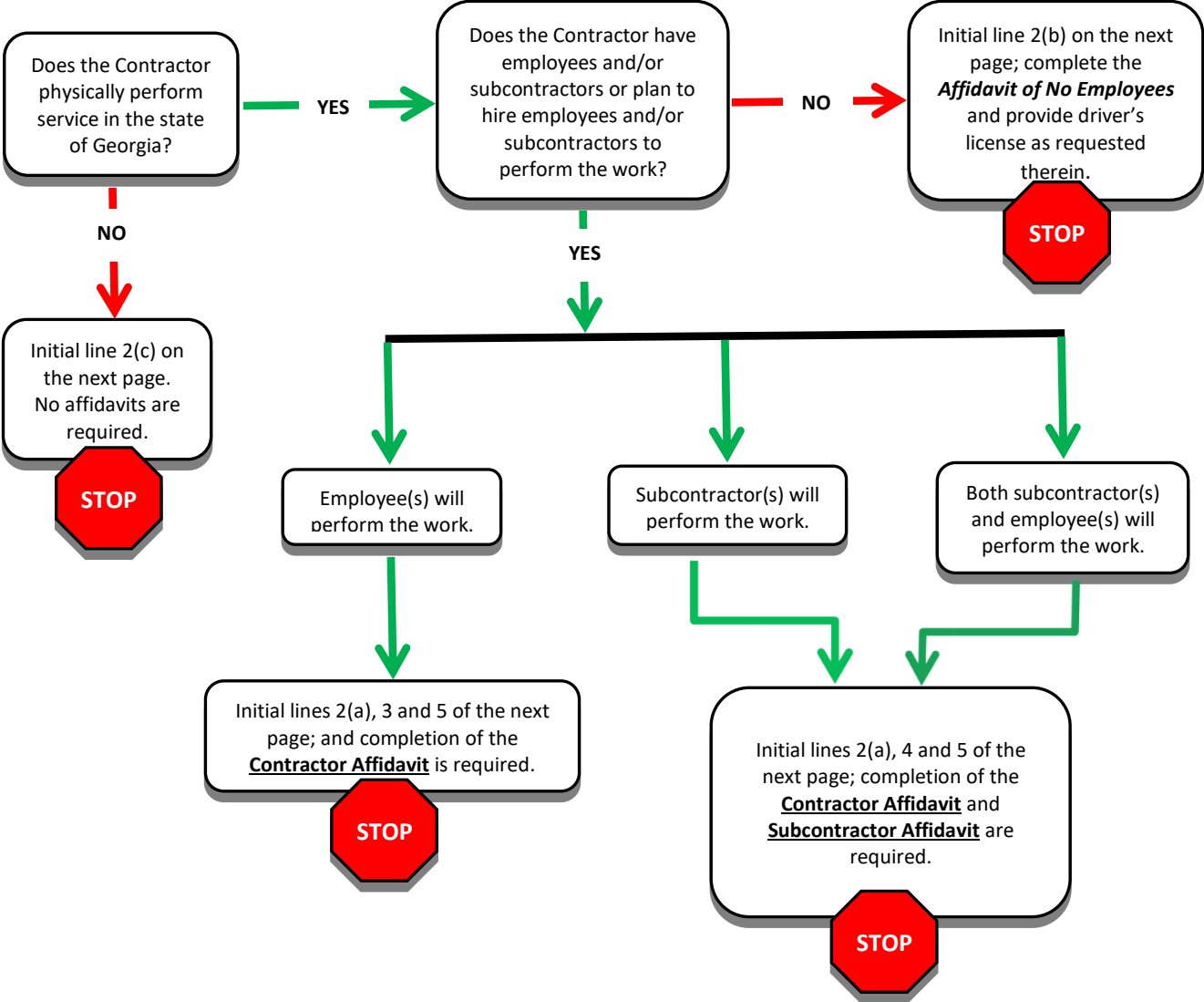
Marc Smith

Keeli Bowen

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GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

**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.



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**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.

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- 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 300-10-1-.01 *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 ***no employees*** and does not intend to hire employees to perform contractual services, and that Contractor has therefore provided a ***U.S. state-issued driver’s license or ID card*** in lieu of an affidavit and that such license or ID card was issued by a State that ***verifies lawful immigration status before issuing the license or ID card***. 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 ***does not physically perform any service within the State of Georgia*** 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 300-10-1-.01 *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 300-10-1-.02, 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 300-10-1-.2; 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 300-10-1-.01 *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 300-10-1-.02, 300-10-1-.03, 300-10-1-.07 and 300-10-1-.08 within five (5) business days of its receipt of any such documents.
- 6) \_\_\_\_\_ ***(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.

**Company Name:** \_\_\_\_\_

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

**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 Number**  
*(4 to 6 Digit Number)*

\_\_\_\_\_

**Date of Authorization**

\_\_\_\_\_

**Contractor/Company Name**

\_\_\_\_\_

**Email Address**

\_\_\_\_\_

**Telephone Number**

\_\_\_\_\_

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_, 20\_\_ in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature of Authorized Officer or Agent

\_\_\_\_\_  
Printed Name of Authorized Officer or Agent

\_\_\_\_\_  
Title of Authorized Officer or Agent

**NOTARY INFORMATION**

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public Signature

My Commission Expires: \_\_\_\_\_

Affix Notarial Seal Here

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)**

By executing this affidavit, the undersigned subcontractor 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 \_\_\_\_\_ (name of contractor), which has 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 subcontractor covenants that it will continue to use the federal work authorization program throughout the contract period, that the undersigned subcontractor will contract for the physical performance of services in the performance of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b), and that the subcontractor shall forward any sub-subcontractor's affidavit to the contractor and School District within five (5) days of its receipt of the same.

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

**EEV User Identification Number**  
*(4 to 6 Digit Number)* \_\_\_\_\_

**Date of Authorization** \_\_\_\_\_

**Subcontractor/Company Name** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_, 20\_\_ in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature of Authorized Officer or Agent

\_\_\_\_\_  
Printed Name of Authorized Officer or Agent

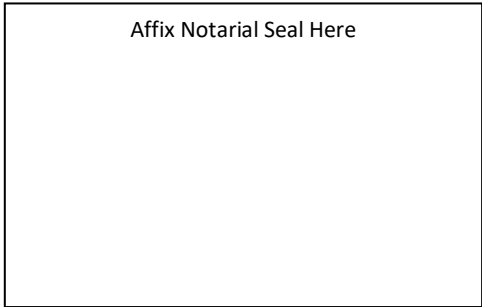
\_\_\_\_\_  
Title of Authorized Officer or Agent

**NOTARY INFORMATION**

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public Signature

My Commission Expires: \_\_\_\_\_



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

**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 *before* 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

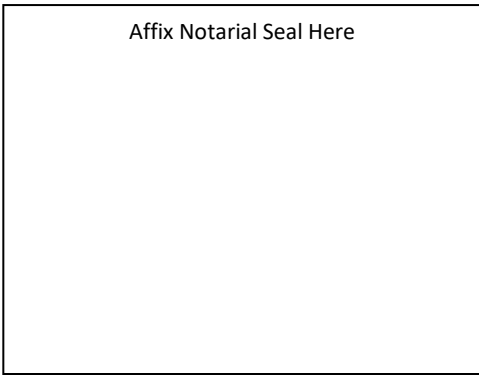
\_\_\_\_\_  
Date

**NOTARY INFORMATION**

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.

1. 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.

**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.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. Contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change  <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known:		<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  Congressional District, if known:
<b>6. Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b> <input type="checkbox"/> NSLP <input type="checkbox"/> SBP <input type="checkbox"/> SFSP <input type="checkbox"/> SMP <input type="checkbox"/> CACFP Code of Federal Domestic Assistance (CFDA) Number, if applicable:	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Entity</b> <i>(if individual, last name, first name, Middle initial):</i>	<b>b. Individuals Performing Services</b> (including address if different from No. 10.a.) <i>(last name, first name, middle initial):</i>	
(Attach Continuation Sheet(s) SF-LLL-A if necessary)		
<b>11. Amount of Payment</b> (check all that apply): \$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned	<b>13. Type of Payment</b> (check all that apply): <input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other, specify: _____	
<b>12. Form of Payment</b> (check all that apply): <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____		
<b>14. Brief description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment indicated in 11:</b>  (attach Continuation Sheet(s) SF-LLL-A, if necessary)		
<b>15. Continuation sheet(s) attached:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>16. Information requested through this form is authorized by title 31 U.S.C. section 1352.</b> This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Signature:  Print Name:  Title:  Telephone No.:                      Date:
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form - LLL



IFB B2117, Document Conversion Services

COBB COUNTY SCHOOL DISTRICT  
MARIETTA, GEORGIA  
PROCUREMENT SERVICES DEPARTMENT

**ACKNOWLEDGEMENT AND AGREEMENT**

**Invitation for Bid B2117, Document Conversion Services**

**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 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.**

IFB B2117, Document Conversion Services  
 COBB COUNTY SCHOOL DISTRICT  
 MARIETTA, GEORGIA  
 PROCUREMENT SERVICES DEPARTMENT

**BID FORM**

Pricing must be submitted on the form(s) below.

Item #	Description	Unit of Measure	Unit Price
1	Conversion of scanned images to 16 MM microfilm master rolls @ 24x	Per 1000	
2	Diazo Duplicate Rolls (including "M" Cartridge)	Per roll	
3	Document prep	Per hour	
4	Document scanning	Per image	
5	Data Entry – Indexing	Per keystroke	
6	Original and any duplicate DVD	Per DVD	
7	Create DVD and/or electronic file from scanned images	Each	
8	Create DVD and/or electronic file from microfilm images (swap order)	Each	
9	Conversion of microfilm to electronic format	Per image	
10	Indexing of microfilm to electronic format	Per keystroke	
11	Conversion of electronic images to microfilm	Per image	
12	Indexing of electronic images to microfilm	Per keystroke	

Vendor Name: \_\_\_\_\_

IFB B2117, Document Conversion Services

COBB COUNTY SCHOOL DISTRICT  
MARIETTA, GEORGIA  
PROCUREMENT SERVICES DEPARTMENT

**BID FORM**

Item #	Description	Unit	Discount/Hourly Rate
13	<b>Per Section 15.9</b> of the Special Terms & Conditions, 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 to the right.	<b>Percentage discount</b>	
14	<b>Per Section 15.10</b> of the Special Terms & Conditions, in the event CCSD has failed to anticipate all service needs, responding vendors are asked to provide a fee structure for additional, related services that may be needed during the award period. Vendors are to provide an hourly rate in the space to the right for service needs that may be identified at a later date. If there are different rates, please provide any/all rate information.	<b>Per hour</b>	

Vendor Name: \_\_\_\_\_

IFB B2117, Document Conversion Services

COBB COUNTY SCHOOL DISTRICT  
MARIETTA, GEORGIA  
PROCUREMENT SERVICES DEPARTMENT

**“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: [gary.blount@cobbk12.org](mailto:gary.blount@cobbk12.org)

Thank you for your cooperation.

**"NO BID" REPLY FORM: IFB B2117, Document Conversion Services**

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

	1. 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.
	3. Our schedule will not permit us to respond.		9. Cannot meet delivery schedule.
	4. 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 these goods/services: Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
*Vendor*

\_\_\_\_\_  
*Representative*

IFB B2117, Document Conversion Services

COBB COUNTY SCHOOL DISTRICT  
MARIETTA, GEORGIA  
PROCUREMENT SERVICES DEPARTMENT  
**IFB B2117, Document Conversion Services**

**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 (pages 26-27)