FURNISH AND DELIVER SCHOOL AND LIBRARY FURNITURE FOR THE HAWAII STATE DEPARTMENT OF EDUCATION AND THE HAWAII STATE LIBRARY SYSTEMS (HSPLS) STATEWIDE IFB D25-029

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"dba" or "division" of a corporation (furnish the exact legal name of the entity under which an awarded contract, if any, will be executed):					
Address:					
Principal Place of Business (may not be a P.O. Box):					
(IIIay IIC	it be a P.O. Box).				
Mailing Address (only if different):					
Payment Address (only if different)					
Offeror's Primary Contact Person: Name					
Title					
Telephone Number				Fax Number	
Email Address					
Federal Tax Identificat	tion Number:				
State of Hawaii Gener License Number:	al Excise Tax				
Type of Business Entity (check one):	 Limited Liabili 	or □ Partner ity Company		Corporation	☐ Joint Venture
If other than a Sole Proprietorship:	Offeror is either: A Hawaii business incorporated or organized under the laws of the State of Hawaii; OR A Compliant Non-Hawaii business incorporated or organized under the laws of the State of				
The undersigned has carefully read and understands the terms and conditions specified herein and hereby submits the following offer to provide the goods and/or perform the work specified herein, all in accordance with the true intent and meaning thereof, and further that the Offeror shall comply with all terms, conditions and requirements of the solicitation. The undersigned further understands and agrees that by submitting his offer, 1) the undersigned is declaring the undersigned's offer is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) the undersigned is certifying that the price(s) submitted was (were) independently arrived at without collusion.					
Authorized (Original in i	Name (printed)				
Title		i	Date		

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EXHIBIT A						
	OFFEROR INFORMATION					
	shall provide the Exhibit A, including attachments if applicable, within three (3) working days ATE's request.					
A.	AUTHORIZED DISTRIBUTOR					
	At the time of bidding, Offeror shall be an authorized distributor or reseller of school and library furniture with at least five (5) years of previous experience in that capacity. As evidence of this, Offeror may be requested to provide documentation from the manufacturer which verifies Offeror's status as an authorized distributor.					
	Number of years of previous experience as an authorized distributor or reseller: Years					
	Authorized distributor or reseller					
В.	OFFICE LOCATION					
	Offeror shall have an office on the island of Oahu from where business is conducted and from where the company is accessible to telephone calls for complaints or requests that need immediate attention. An answering service is not acceptable.					
	Business Name					
	Address 1					
	Address 2					
	Phone Number					
C.	PERSONNEL					
	Offeror shall designate at least one (1) employee as the STATE point of contact (POC) for this contract. This individual shall be based in Hawaii and available during regular business hours, 7:45 a.m. to 4:30 p.m. Hawaii Standard Time (HST), Monday through Friday excluding holidays and shall be capable of answering questions, resolving problems, and providing sales, ordering, and follow-up assistance.					
	POC Name					
	Telephone Number					

Offeror:

	Offeror:	
Cell Number		
Fax Number		
Email Address		