

**FURNISH AND DELIVER DISPOSABLE FOOD SERVICE PRODUCTS – GLOVES AND MASKS
TO HAWAII DEPARTMENT OF EDUCATION CAFETERIAS, STATEWIDE
IFB D21-013**

Chief Procurement Officer
State of Hawaii, Department of Education
Honolulu, Hawaii 96813

To Whom It May Concern:

The undersigned has carefully read and understands the terms and conditions specified in the Specifications, Special Conditions, and General Conditions, attached hereto, and hereby submits the following offer to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this offer, 1) he/she is declaring his/her offer is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) he/she is certifying that the price(s) submitted was (were) independently arrived at without collusion.

The undersigned represents: **(Check one only)**

- A **Hawaii business** incorporated or organized under the laws of the State of Hawaii; **OR**
- A **Compliant Non-Hawaii business** not incorporated or organized under the laws of the State of Hawaii, but registered at the State of Hawaii Department of Commerce and Consumer Affairs Business Registration Division to do business in the State of Hawaii.

State of incorporation: _____

Offeror is a:

Sole Proprietor Partnership Corporation Joint Venture Other _____

Federal I.D. No.: _____ Hawaii General Excise Tax License I.D. No.: _____

Payment address (other than street address below): _____

City, State, Zip Code: _____

Business address (street address): _____

City, State, Zip Code: _____

Date: _____

Respectfully submitted:

Telephone No.: _____

Authorized (Original) Signature

Fax No.: _____

Name and Title (Type or Print)

E-mail Address: _____

* _____
Exact Legal Name of Company (Offeror)

*If Offeror is a "dba" or a "division" of a corporation, furnish the exact legal name of the corporation under which the awarded contract will be executed: _____

EXHIBIT A

Offeror shall provide Exhibit A within three (3) business days from STATE request. Offeror shall print a copy of the page below for each island Offeror is submitting an offer on.

1. Facility. Offeror shall provide the following information regarding their facility based in the State of Hawaii that will be servicing the island specified herein and name of contact person. (Reference Special Conditions, Offeror Qualifications):

Name of Company _____

Address _____

Telephone No. _____ Fax No. _____

E-Mail Address (if applicable) _____

Name of Contact Person(s) _____