# STEPHEN F. AUSTIN STATE UNIVERSITY

THE UNIVERSITY OF TEXAS SYSTEM \* NACOGDOCHES, TEXAS

| FAILURE TO SIGN W                                                                                                                                                                                                                                                                                                                                                                                                                           | /ILL DISQUAL                                                                                                 | '                                                                                                                            | IVITATION TO                                                                                                                                                                               | Bid N<br>SWIT                                                                             | CHER-202                  | PRODUCTION<br>4<br>25, 2024 at 3 |                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|---------------------------|----------------------------------|----------------------|
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                   | City                                                                                                         | Zip                                                                                                                          |                                                                                                                                                                                            | Show b                                                                                    | id opening an             | d bid invitation num             | ber in lower left-   |
| Printed Name<br>VENDOR NAM                                                                                                                                                                                                                                                                                                                                                                                                                  | 1E AND ADDR                                                                                                  | RESS                                                                                                                         | PHONE/FA                                                                                                                                                                                   | X Email                                                                                   | to: bids@                 | sfasu.edu                        |                      |
| Name of Firm                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                              |                                                                                                                              | Phone                                                                                                                                                                                      |                                                                                           | e (936) 468<br>936) 468-4 |                                  |                      |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                              |                                                                                                                              | FAX                                                                                                                                                                                        | (See                                                                                      | 2.3 reverse               | e side)                          |                      |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                        | State                                                                                                        | Zip                                                                                                                          | EMAIL                                                                                                                                                                                      |                                                                                           |                           |                                  |                      |
| See Instruction 2.11 on Is Vendor a State of Tex                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                              |                                                                                                                              | Delivery in                                                                                                                                                                                | Days C                                                                                    | ash Disc.                 | % _                              | Days                 |
| <ul> <li>Supplies, materials or equipment: produced in TX/offered</li> <li>by TX bidders*</li> <li>Agricultural products grown in TX</li> <li>Agricultural products offered by TX bidders*</li> <li>USA produced supplies, materials or equipment</li> <li>Products produced at facilities located on formerly</li> <li>contaminated property</li> <li>Poducts producer as a Texas resident Bidder as defined in Rule 34 TAC 20.</li> </ul> |                                                                                                              |                                                                                                                              |                                                                                                                                                                                            |                                                                                           | essed                     |                                  |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                              |                                                                                                                              | ITEM(S) BELOW,<br>SIDERED F.O.B. D                                                                                                                                                         |                                                                                           |                           |                                  |                      |
| <b>AWARD NOTICE:</b> Stephe or in any other combination                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                              |                                                                                                                              | =                                                                                                                                                                                          |                                                                                           |                           |                                  | total of line items, |
| Item No.                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                              |                                                                                                                              | cription                                                                                                                                                                                   |                                                                                           |                           | Unit Price                       | Extension            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                              |                                                                                                                              | ure, extend and show state sales and federa                                                                                                                                                |                                                                                           |                           | ŭ                                |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                             | Stephen F. A<br>purchase of a<br>Video Contro<br>Department a                                                | ustin State Un<br>an Ultrix Carbo<br>I Room for the                                                                          | niversity is seeking<br>onite v2 to be insta<br>onite Mass Communic<br>Austin State Unive                                                                                                  | g bids for the<br>alled in the<br>cations                                                 |                           |                                  |                      |
| TD2S-<br>PANEL                                                                                                                                                                                                                                                                                                                                                                                                                              | TouchDrive 2                                                                                                 | 2 ME S Series                                                                                                                | Panel                                                                                                                                                                                      |                                                                                           |                           |                                  |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                             | CBF-113 Fra<br>buttons •IPS<br>information a<br>buttons and 3<br>Memory keyp<br>modes •6-Axi<br>Optional Tou | mes •2 full ME<br>Touch Display<br>nd integrated (<br>3 User Trans B<br>pads for each N<br>is Control Joys<br>ch Display ava | compatible with 0<br>control rows •25<br>is in every module<br>Control •25 Row 9<br>Buttons per ME Ro<br>ME row with Loca<br>stick •DashBoard<br>ailable. Display Po<br>conal Touch Displa | Crosspoint e. Source/Data Select User ow •Effect I and Global PC built in! ort connection | 1                         | \$                               | \$                   |

|                 | and Mouse. •Panel Glow – full RGB led buttons •Ethernet rack frame connectivity •On-Desk and In Desk mounting with hardware included                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |   |    |    |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|----|
| TD-TouchScreen  | TouchDrive TouchScreen Display                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |   |    |    |
|                 | 15.6 Inch TouchScreen 1920x1080 Resolution Power supplied via Touch Drive Panel USB, Power and Display Port Cable Included VESA 75 and 100 Mounting Pattern No Mounting hardware included. User must supply standard VESA Stand or Arm.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1 |    |    |
| CHE BOH         | Carbonita I Iltra Standard Dowar Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |   | \$ | \$ |
|                 | Carbonite Ultra Standard Power Supply Standard Power Supply unit for Carbonite Ultra Engines. 2 Units required for Redundant Power.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1 | \$ | \$ |
| CUF-PSU         | Carbonite Ultra Standard Power Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |   | Ψ  | Φ  |
|                 | Standard Power Supply unit for Carbonite Ultra Engines. 2 Units required for Redundant Power.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1 | \$ | \$ |
|                 | Ultrix New Style 2RU Frame w/ 16x16 plus 2 AUX (Ultrimix and Ultriclean included)  New Style 2RU Ultrix. Includes 16x16 HD BNC + 2AUX I/O Ports standard Can be expanded to 72x72 with additional additional HDIO blade + Aux ports. New Style includes support for optional IP-IO blade, IP licenses and other I/O blade options. Standard includes SMPTE 259M, 292M, 344M, and 424M (support for most common SMPTE 2082 signals is included with optional 12G Ultrispeed license). Includes Ultrimix and Ultriclean licenses. Ultrimix allows for routing, mixing, and processing of all embedded audio inputs, as well as the ability to support up to 512x512 discrete mono audio inputs through the use of the AUX I/O ports. Comes with two power supplies.  To come with a 1 year comprehensive warranty. | 1 |    |    |
| III TRIY-HDY-IO | I/O board -16x16, Advanced Connectivity, 2 AUX I/O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |   | \$ | \$ |
|                 | I/O Board - 16x16 HD-BNCs, 4 AUX port IO, AUX ports A & B active, AUX ports C & D for future use (Ultrimix and Ultriclean included) - Occupies 1 slot in frame                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1 | \$ | \$ |
| SWR-SDPE        | Software Defined Production Engine                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |   |    |    |
|                 | Software Defined Production Engine (SDPE) Blade for Ultrix FR Series Frames Includes one SDPE Blade -1 Slot in FR Frame required (Specific Slots may apply depending                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1 | ¢  | ¢  |
|                 | on Frame) Ultrix Carbonite ME 1 License                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 4 | \$ | \$ |
|                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1 | \$ | \$ |

|               | Adds the ME 1 License to the SWR-SDPE Blade. (UHD License required for UHD Rates) Includes: -MultiDefinition Format Support: 720p50/59.94, 1080i50/59.94, 1080pSF 23.98/25/29.97, 1080p23.98/24/25/29.97/30/50/59.94/60 - 22 Inputs, 18 connected to the Router XPT and 4 Dedicated on the SDPE Blade -22 Outputs, 18 connected to the Router XPT and 4 Dedicated on the SDPE Blade (MV selectable on any output) -1 HD ME with 6 Keyers plus a Transition Keyer4 HD MiniME with 2 Keyers and Full Preview -4 HD MediaStores with Video and Alpha each -12 HD 2D DVE with Advanced Borders -2 HD MultiViewers - each up to 16 independent windows. 49 Layouts to select from1 HD H.264 Video Clip player. Streams video directly from the USB storage -DashBoard Menu System and Virtual Panel -Carbonite Device Controls - AMP, RossTalk, PBUS, VISCA, Cambot, Yamaha Serial Midi (DM1000/01V96), TSL v3.1 and GVG 100 Editor Control - LiveEDL for "Live to Tape" events with quick turn around edit workflows -24 GPIO (individually assignable as Input or Output) -24 Tally -2 AES for Media Store Audio and Clip Player Audio -1 LTC for Time Clock and LiveEDL -10 Bit Video Processing in All Video Formats -24/7 Phone Support -Includes XPression Live CG |   |    |    |
|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|----|
| CUFR-ADD-ME2  | Ultrix Carbonite ME 2 License                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |    |    |
|               | Adds the ME 2 License to the SWR-SDPE Blade.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1 |    |    |
|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |   | \$ | \$ |
| CUFR-ADD-FSFC | Ultrix Carbonite FSFC License                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |    |    |
|               | Adds the Frame Sync and Format Conversion License to the SWR-SDPE Blade. Includes in UHD: -4 Frame Sync with Format Converters. User Assignable to any of the inputs -Convert HD 720p/1080i/1080p of the same Frame Rate to UHD system format Includes in HD: -Frame Sync with Format Converters on every input -Convert SD to 1080i, 720p to 1080i, 1080p to 1080i, 1080p-720p, 720p to 1080p, 1080i to 1080p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1 | \$ | \$ |
| CUFR-ADD-PACC | Ultrix Carbonite PA/CC License                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |   | Ψ  | Ψ  |
|               | Adds the Proc Amp and Color Corrector License to the SWR-SDPE Blade. Includes in UHD: -4 Proc Amp / Color Correctors. User Assignable to any of the inputs -Can be used for re-mapping SDR to HDR (HLG, PQ, SLOG3) and 709 to 2020 color Space Includes in HD: -Proc Amp / Color Corrector on every input -Adjust video signals to match color temperatures and settings of other sources.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1 |    |    |
|               | VProceion LivoCG Software Only License                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   | \$ | \$ |
| XDS0-0001-CPS | XPression LiveCG Software Only License  XPression LiveCG Software Only License • Limit one copy per Carbonite Production Switcher • Includes 1 Copy of XPression Designer • Includes RossLinq interface between XPression and the Carbonite Media Store Channels • Allows for creation of Single-frame Graphics and Transfer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1 | \$ | \$ |

|                   | from a PC directly into the Media Store Channels • Up to two channels with dedicated alpha can be controlled from the XPression Software Client • Must be purchased at the same time as the Carbonite Production Switcher • Requires Customer Supplied Windows 10 Pro PC with NVIDIA Graphics |   |             |          |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-------------|----------|
| ULTRIPOWER        | Ultrix Rackmount 1RU power supply frame with 1 power supply                                                                                                                                                                                                                                   |   |             |          |
|                   | Rackmount 1RU power supply frame supporting up to four Ultrix-1RUs or two Ultrix-RUs (one Ultripower-PS power supply comes standard; Includes four DC cables                                                                                                                                  | 1 | \$          | \$       |
| ULTRIPOWER-PS     | Modular power supply for Ultripower rack mount PS frame                                                                                                                                                                                                                                       |   | <del></del> | <b>—</b> |
|                   | Modular power supply for Ultripower rack mount power supply frame (15V-1150W)                                                                                                                                                                                                                 | 1 | \$          | \$       |
| ULTRISCAPE        | Ultriscape Multiviewer License                                                                                                                                                                                                                                                                |   |             |          |
|                   | Software license that enables 1 multiviewer head. Each slot is capable of supporting up to 3 multiviewer heads                                                                                                                                                                                | 1 | \$          | \$       |
| ULTRISYNC         | Ultrisync Framesync License (OPTIONAL, MAY NOT BE                                                                                                                                                                                                                                             |   | 7           | T        |
|                   | PURCHASED)                                                                                                                                                                                                                                                                                    | 1 |             |          |
|                   | Software license that enables framesync up to 3G on                                                                                                                                                                                                                                           | 1 |             |          |
| III TON DO        | individual input ports.                                                                                                                                                                                                                                                                       |   | \$          | \$       |
| ULTRIX-PS         | Redundant power supply                                                                                                                                                                                                                                                                        |   |             |          |
|                   | Need 1 for redundancy in 1RU frame Need 2 for redundancy in 2RU frame                                                                                                                                                                                                                         | 2 | \$          | \$       |
| SWR-SDPE-HM       | Software Defined Production Engine Blade Hardware Warranty (OPTIONAL, MAY NOT BE PURCHASED)                                                                                                                                                                                                   |   |             |          |
|                   | Adds 1 Year of Hardware Warranty for the SWR-SDPE                                                                                                                                                                                                                                             | 1 |             |          |
| TD2S-PANEL-HM     | TouchDrive 2 ME S Series Panel Warranty (OPTIONAL,                                                                                                                                                                                                                                            |   | \$          | \$       |
| 1520 I ANEL-IIII  | MAY NOT BE PURCHASED)                                                                                                                                                                                                                                                                         |   |             |          |
|                   | 2 ME S. Sarias Band Warranti                                                                                                                                                                                                                                                                  | 1 |             |          |
|                   | 2 ME S - Series Panel Warranty                                                                                                                                                                                                                                                                |   | \$          | \$       |
| TD-TouchScreen-HM | TouchDrive TouchScreen Display Warranty (OPTIONAL, MAY NOT BE PURCHASED)                                                                                                                                                                                                                      | 4 |             |          |
|                   | TouchDrive 15.6" screen Warranty                                                                                                                                                                                                                                                              | 1 | \$          | \$       |
| SWR-SDPE-HM       | Software Defined Production Engine Blade Hardware Warranty                                                                                                                                                                                                                                    | 4 |             |          |
|                   | Adds 1 Year of Hardware Warranty for the SWR-SDPE                                                                                                                                                                                                                                             | 1 | \$          | \$       |
| TD2S-PANEL-HM     | TouchDrive 2 ME S Series Panel Warranty                                                                                                                                                                                                                                                       |   |             |          |
|                   | 2 ME S - Series Panel Warranty                                                                                                                                                                                                                                                                | 1 | \$          | \$       |
| TD-TouchScreen-HM | TouchDrive TouchScreen Display Warranty                                                                                                                                                                                                                                                       | _ |             |          |
|                   | TouchDrive 15.6" screen Warranty                                                                                                                                                                                                                                                              | 1 | \$          | \$       |
|                   | 10451121176 10.0 3010011 VValidity                                                                                                                                                                                                                                                            |   | <u> </u> Ψ  | ΙΨ       |

| XDS0-SM       | XPression Designer (SW Only) Maint                                                                                                                                                                                                    |   |    |    |
|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|----|
|               | XPression Designer (SW Only) Maint Access to ongoing Software updates and enhancements for one year                                                                                                                                   | 1 | \$ | \$ |
| XDS0-SM       | XPression Designer (SW Only) Maint (OPTIONAL, MAY NOT BE PURCHASED)                                                                                                                                                                   |   | Ψ  | Ψ  |
|               | XPression Designer (SW Only) Maint Access to ongoing Software updates and enhancements for one year                                                                                                                                   | 1 | \$ | \$ |
| ULTRIX-FR2-HM | Extended Warranty, Ultrix 2RU System                                                                                                                                                                                                  |   | Ψ  | Ψ  |
|               | Warranty covers frame and all hardware options installed in the frame. Extends Standard Warranty by 1 Full Year                                                                                                                       | 1 | \$ | \$ |
| ULTRIPOWER-HM | Ultripower - Hardware Warranty                                                                                                                                                                                                        |   | Ψ  | Ψ  |
|               | Extended warranty for Ultripower hardware. Term is one year                                                                                                                                                                           | 1 | \$ | \$ |
| ULTRIX-FR2-HM | Extended Warranty, Ultrix 2RU System (OPTIONAL, MAY NOT BE PURCHASED)                                                                                                                                                                 |   | Ψ  | Ψ  |
|               | Warranty covers frame and all hardware options installed in the frame. Extends Standard Warranty by 1 Full Year                                                                                                                       | 1 | \$ | \$ |
| ULTRIPOWER-HM |                                                                                                                                                                                                                                       |   | Ψ  | Ψ  |
|               | BE PURCHASED)                                                                                                                                                                                                                         |   |    |    |
|               | Extended warranty for Ultripower hardware. Term is one year                                                                                                                                                                           | 1 |    |    |
|               |                                                                                                                                                                                                                                       |   | \$ | \$ |
| INSTALLATION  | Installation and Engineering of the items listed above.                                                                                                                                                                               | 1 |    |    |
|               | Installation to be completed by 08/31/2024.                                                                                                                                                                                           | ' |    |    |
|               | SMOKING, VAPING, AND USE OF TOBACCO PRODUCTS                                                                                                                                                                                          |   |    |    |
|               | Stephen F. Austin State University is a tobacco and vape free campus.                                                                                                                                                                 |   |    |    |
|               | ·                                                                                                                                                                                                                                     |   |    |    |
|               | PARKING ON CAMPUS  All vehicles parked on the University campus must properly display a valid parking permit and comply with all University                                                                                           |   |    |    |
|               | parking rules. The Parking and Traffic Office supervises and coordinates all parking transportation and traffic related functions on the campus. Permits expire each August 31. Contractor shall be responsible for obtaining parking |   |    |    |
|               | permits from the Parking and Traffic Office and for resolving, should they arise, any parking regulation disputes and violations. The Parking and Traffic Office telephone number is 936-468-7275.                                    |   |    |    |
|               |                                                                                                                                                                                                                                       |   |    |    |

### **INSURANCE**

The Contractor shall not commence work under this Contract until he has obtained all the insurance required hereunder and certificates of such insurance have been filed with and reviewed by SFASU. Acceptance of the insurance certificates by SFASU shall not relieve or decrease the liability of the Contractor.

If policies are not written for the amounts specified below (except Worker's Compensation and Employer's Liability), Contractor shall carry Excess Liability insurance for any difference in amounts specified. If Excess Liability insurance is provided, it shall follow the form of primary policy.

This insurance shall not be canceled, limited in scope of coverage, or non-renewed until after thirty (30) days prior written notice, or ten (10) days for non-payment of premium, has been given to the University.

Contractor's insurance shall be deemed primary with respect to any insurance carried by Stephen F. Austin State University for liability arising out of operations under this Contract.

Stephen F. Austin State University, its officials, directors, employees, representatives and volunteers shall be named as additional insured. This is not applicable to the workers' compensation policy.

The workers' compensation and employers' liability policy will provide a waiver of subrogation in favor of the University.

The workers' compensation insurance coverage must include the responsibility of the Contractor to provide coverage for every worker either under the Contractor's policy or under the policy provided by a subcontractor. The Contractor's policy shall provide that, in the event that a subcontractor's policy fails to provide worker's compensation coverage of a worker, that such insurance coverage is provided by the Contractor's policy

Unless otherwise provided for herein, the Contractor shall provide and maintain, until the Work covered in this Contract is completed and accepted by SFASU, the minimum insurance coverage as follows:

### TYPE OF COVERAGE LIMITS OF LIABILITY

- 1. Workers' Compensation Coverage OR Employer's Liability with \$1,000,000 each occur/aggregate
- 2. Comprehensive General Liability
  - a. \$1,000,000 each occur
  - b. \$2,000,000 general aggregate
  - c. \$2,000,000 products/
- 3. Comprehensive Automobile Liability \$1,000,000 combined single limit

### ADDITIONAL TERMS AND CONDITIONS

https://www.sfasu.edu/docs/procurement-businessservices/purchase-order-general-terms-conditions.pdf

### **CONTACT INFORMATION**

Questions relating to the solicitation document, or the response may be directed to Contracting Specialist, Teresa Rhodes, 936-468-4460, Teresa.Rhodes@sfasu.edu

### **HUB SUBCONTRACTING PLAN**

Each respondent is required to make a good faith effort to subcontract with historically underutilized businesses and shall submit a HUB Subcontracting Plan using the HUB Subcontracting Plan documents provided in **Exhibit B**.

Stephen F. Austin State University is committed to making a good faith effort to increase business with historically underutilized businesses (HUBs) by contracting with HUBs either directly or indirectly through subcontracting opportunities. Respondents are encouraged to actively seek to subcontract or partner with HUBs in an effort to create an environment that actively acknowledges and values diversity.

The University has determined that subcontracting opportunities are probable under this contract.

The University's HUB goal for this procurement is: **26%** for other services.

Each HUB subcontracting plan will be evaluated independently of the response. If the HSP does not reflect a good faith effort to subcontract with HUBs, the entire response will be disqualified. All questions regarding the HUB Subcontracting Plan may be directed to the HUB Coordinator, Lacey Bradshaw, 936-468-4412 or Lacey.Bradshaw@sfasu.edu.

<u>Failure to submit the HUB Subcontracting Plan will</u> disqualify the entire response from consideration.

### REQUIRED SUBMITTALS

- 1) Signed Invitation to Bid
- 2) Non-Collusion Affidavit Exhibit A
- 3) Acknowledgement of Addenda (if any)
- 4) HUB Subcontracting Plan Exhibit B
- 5) Certificate of Insurance

### **BID OPENING**

All bids are due back on Tuesday, June 25, 2024 at 3 pm. Bids must be sent via email to <a href="mailto:bids@sfasu.edu">bids@sfasu.edu</a>.

### ITEMS BELOW APPLY TO AND BECOME PART OF TERMS AND CONDITIONS OF QUOTATIONS. ANY EXCEPTIONS THERETO MUST BE IN WRITING AND SUBMITTED WITH INVITATION TO BID.

- 1. BIDDER AFFIRMATIONS: Signing this bid 2. with a false statement is a material breach of 2.1 contract and shall void the submitted bid or any resulting contracts. By signature hereon affixed, the bidder hereby certifies that:
- The bidder has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted bid.
- bidder nor the firm, corporation, 1.2 The partnership, or institution represented by the bidder, or anyone acting for such firm, corporation, or institution has violated the antitrust laws of this State or the Federal antitrust laws nor communicated directly or indirectly the bid made to any competitor or any other person engaged in such line of 2.3 business.
- 1.3 Pursuant to Texas Government Code, Section 2155.004(a), the bidder has not received compensation for participation in the preparation of the specifications for this solicitation.
- 1.4 If applicable, pursuant to Section 231.006 of 2.4 the Texas Family Code (relating to child support) the bidder certifies that the individual or business entity named in this bid is not ineligible to receive the specified payment and acknowledges that this contract may be terminated and payment may be withheld if this certification is inaccurate. Furthermore, any bidder subject to Section 231.006 must include names and Social Security numbers of each 2.6 person with at least 25% ownership of the business entity submitting the bid. information must be provided prior to award.
- 1.5 Pursuant to Texas Government Code, Section 2155.004(b), the vendor certifies that the individual or business entity named in this bid 2.7 or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.
- 1.6 Bidder agrees that pursuant to Section 2107.008 and 2252.903, Texas Government Code, any payments due under this contract will be applied directly toward any debt, including but not limited to delinquent taxes 2.9 and child support, that is owed to the State of Texas or any agency of the State of Texas regardless of when it arises, until such debt or delinquent taxes are paid in full.

  1.7 Bidder certifies that they are in compliance
- with Texas Government Code, Section 669.003, relating to contracting with executive head of a State agency. If Section 669.003 applies, the bidder will complete the following information in order for the bid to be evaluated:

Name of former Executive:

Name of State Agency:

Date of separation from State Agency:

Position with bidder:

Date of employment with bidder:

- 1.8 Bidder agrees to comply with Texas Government Code 2155.4441, relating to the use of service contracts for products 3. produced in the State of Texas.
- By signature hereon, the Respondent hereby certifies that he/she is not currently delinquent in the payment of any franchise 4. taxes owed the State of Texas.

BIDDING REQUIREMENTS:

- Bids should be submitted on this form. Each bid shall be placed in a separate envelope completely and properly identified. When sending bids via overnight delivery, bidder is advised to confirm whether SFA delivery location is a guaranteed AM delivery.
- SFA offers facsimile or email service as a The only telephone convenience only. number for FAX submission of bids is 936-468-4282. The only email for email submission of bids is <a href="mailto:bids@sfasu.edu">bids@sfasu.edu</a>. The The University shall not be responsible for bids or portions of bids received late, illegible, incomplete, or otherwise non-responsive due to failure of electronic equipment, technology error, or operator error. Confirmation of facsimile or email bids is not required.
- Bids must be time stamped in the SFA Procurement & Business Services Office on or before the hour and date specified for the bid opening. Late bids will not be considered under any circumstances. Late bids properly identified will be returned to the bidder unopened.
- Bids are requested to be firm for acceptance for a minimum of 30 days from opening date. Bid cannot be altered or amended after opening time. No bid can be withdrawn after opening time without the approval of the University based on a written acceptable reason.
- Telephone quotations are not acceptable when in response to this Invitation to Bid.
- Stephen F. Austin State University reserves the right to accept or reject all or any part of any bids, to waive minor technicalities, to readvertise if deemed necessary, and to award the bid to best serve the interests of the University.
- All electrical items must meet all applicable OSHA standards and regulations, and bear 8. the appropriate listing from US, FMRC or NEMÁ.
- All items shall be new, in first class condition, with containers suitable for shipment and storage. New shall not be construed as excluding recycled or remanufactured products.
- Any catalog, brand name or manufacturer's reference used in this bid is descriptive (not restrictive).
- Stephen F. Austin State University will not be bound by any oral statement or representation contrary to the written specifications of this ITB and any associated addenda.
- 2.11 Bids should give Payee ID Number, full firm name and address of bidder. The Payee ID Number is the taxpayer number assigned and used by the Comptroller of Public Accounts of Texas. If this number is not known, complete the following:

Enter Federal Employer's Identification

Sole Owner should also enter SSN# below

TIE BIDS - Awards will be made in accordance

with Rule TAC, Title 34, as amended. (preferences).

### PATENTS OR COPYRIGHTS - The

Contractor agrees to protect Stephen F. Austin State University from claims involving infringement of patents or copyrights.

- PAYMENT Vendor shall submit an itemize invoice showing Purchase Order Number Payment will be made Net 30 from date of recei of goods/services or invoice, whichever is late Late fees will be incurred in accordance wi Texas Government Code 2251. Invoices and ar required supporting documents must the presented to: SFASU Accounts Payable, P.0 Box 6085, Nacogdoches, TX 75962 electronically submitted accountspayable@sfasu.edu.
- DELIVERY:
- Bids should show the number of days required place material in designated location und normal conditions. Failure to state delivery time obligates bidder to complete delivery in calendar days. A five-day difference in delive promise may break tie bids. Unrealistic short long delivery promises may cause the bid to t disregarded.
- 6.2 Delivery shall be made during normal workir hours only, unless prior approval for early or la delivery has been obtained.
- If delay is foreseen, contractor shall give writte notice. The University has the right to exter delivery date if reasons appear valid. Contract must keep the University advised at all times status of order. Default in promised delive (without accepted reasons) or failure to me specifications, authorizes the University purchase supplies elsewhere and charge fi increase, if any, in cost and handling to defaultir contractor
- 6.4 No substitutions or cancellations are permitte
- without prior written approval.

  ALTERNATE DISPUTE RESOLUTION:

Pursuant to Chapter 2260 of the Texa Government Code, any dispute arising under contract for goods and services for which th chapter applies must be resolved under th provisions of this chapter.

**PUBLIC INFORMATION ACT:** 

Information, documentation, and other material connection with this solicitation or any resultir contract may be subject to public disclosu pursuant to Chapter 552 of the Texa Government Code (the "Public Information Act" Bidder acknowledges that University may k required to post a copy of the contract on i website in compliance with Section 2261.253(a)(1), Texas Government Code.

- NOTE TO BIDDERS:
- Any terms and conditions attached to a solicitatic will not be considered unless specifically referre to on this solicitation and may result disqualification.
- The Contractor shall defend, indemnify and ho harmless the State of Texas, all of its officer agents and employees from and against a claims, actions, suits, demands, proceeding costs, damages, and liabilities, arising out connected with, or resulting from any acts omissions of contractor or any agent, employe subcontractor, or supplier in the execution performance of this contract.
- 9.3 Contractor understands that acceptance of fund under this contract acts as acceptance of the authority of the State Auditor's Office or ar successor agency, or Stephen F. Austin's Intern Audit Services, to conduct an audit investigation in connection with those fund Contractor further agrees to cooperate fully wi the State Auditor's Office or its successor, Stephen F. Austin's Internal Audit Services in the conduct of the audit or investigation, includir providing all records requested. Contractor w ensure that this clause concerning the authority audit funds received indirectly by subcontracto through Contractor and the requirement cooperate is included in any subcontract award

### EXHIBIT A NON-COLLUSION AFFIDAVIT

The undersigned, duly authorized to represent the persons, firms and corporations joining and participating in the submission of the foregoing Proposal (such persons, firms and corporations hereinafter being referred to as the "Respondents"), being duly sworn, on his or her oath, states that to the best of his or her belief and knowledge no person, firm or corporation, nor any person duly representing the same joining and participating in the submission of the foregoing Proposal, has directly or indirectly entered into any agreement or arrangement with any other Respondent, or with any official of SFA or any employee thereof, or any person, firm or corporation under contract with SFA whereby the Respondent, in order to induce acceptance of the foregoing Proposal by said SFA, has paid or is to pay to any other Respondent or to any of the aforementioned persons anything of value whatsoever, and that the Respondent has not, directly or indirectly entered into any arrangement or agreement with any other Respondent or Respondent which tends to or does lessen or destroy free competition in the letting of the contract sought for by the foregoing Proposal.

The Respondent hereby certifies that neither it, its officers, partners, owners, providers, representatives, employees and/or parties in interest, including the affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Respondent, potential Respondent, firm or person, in connection with this solicitation, to submit a collusive or sham bid, to refrain from bidding, to manipulate or ascertain the price(s) of other Respondents or potential Respondents, or to obtain through any unlawful act an advantage over other Respondents or SFA.

The prices submitted herein have been arrived at in an entirely independent and lawful manner by the Respondent without consultation with other Respondents or potential Respondents or foreknowledge of the prices to be submitted in response to this solicitation by other Respondents or potential Respondents on the part of the Respondent, its officers, partners, owners, providers, representatives, employees or parties in interest including the affiant.

### **CONFLICT OF INTEREST**

The undersigned Respondent and each person signing on behalf of the Respondent certifies, and in the case of a sole proprietorship, partnership or corporation, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of their knowledge and belief, no member of SFA, nor any member of its Board of Regents, employee, or person whose salary is payable in whole or in part by SFA, has a direct or indirect financial interest in the award of the Proposal, or in the services to which this Proposal relates, or any of the profits, real or potential, thereof, except as noted otherwise herein.

| Signature      | <br> |  |
|----------------|------|--|
|                |      |  |
| Company name _ |      |  |
|                |      |  |
| Date           |      |  |

# Exhibit B HUB Subcontracting Plan

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# HUB Subcontracting Plan (HSP) QUICK CHECKLIST

While this HSP Quick Checklist is being provided to merely assist you in readily identifying the sections of the HSP form that you will need to complete, it is very important that you adhere to the instructions in the HSP form and instructions provided by the contracting agency.

- If you will be awarding all of the subcontracting work you have to offer under the contract to only Texas certified HUB vendors, complete:
  - Section 1 Respondent and Requisition Information
  - Section 2 a. Yes, I will be subcontracting portions of the contract.
  - Section 2 b. List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.
  - Section 2 c. Yes
  - Section 4 Affirmation
  - GFE Method A (Attachment A) Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.
- If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract\* in place for more than five (5) years meets or exceeds the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements", complete:
  - Section 1 Respondent and Requisition Information
  - Section 2 a. Yes, I will be subcontracting portions of the contract.
  - Section 2 b. List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors and Non-HUB vendors.
  - Section 2 c. No
  - Section 2 d. Yes
  - Section 4 Affirmation
  - GFE Method A (Attachment A) Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.
- If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors or only to Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract\* in place for more than five (5) years does not meet or exceed the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements", complete:
  - Section 1 Respondent and Requisition Information
  - Section 2 a. Yes, I will be subcontracting portions of the contract.
  - Section 2 b. List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors and Non-HUB vendors.
  - Section 2 c. No
  - Section 2 d. No
  - Section 4 Affirmation
  - GFE Method B (Attachment B) Complete an Attachment B for each of the subcontracting opportunities you listed in Section 2 b.
- If you will not be subcontracting any portion of the contract and will be fulfilling the entire contract with your own resources (i.e., employees, supplies, materials and/or equipment), complete:
  - Section 1 Respondent and Requisition Information
  - Section 2 a. No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources.
  - Section 3 Self Performing Justification
  - Section 4 Affirmation

\*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service, to include under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

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c. Requisition #:

# **HUB Subcontracting Plan (HSP)**

In accordance with Texas Gov't Code §2161.252, the contracting agency has determined that subcontracting opportunities are probable under this contract. Therefore, all respondents, including State of Texas certified Historically Underutilized Businesses (HUBs) must complete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to the bid requisition (solicitation).

NOTE: Responses that do not include a completed HSP shall be rejected pursuant to Texas Gov't Code §2161.252(b).

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.284 are:

- 11.2 percent for heavy construction other than building contracts,
- 21.1 percent for all building construction, including general contractors and operative builders' contracts,
- 32.9 percent for all special trade construction contracts,
- · 23.7 percent for professional services contracts,
- · 26.0 percent for all other services contracts, and
- 21.1 percent for commodities contracts.

### - - Agency Special Instructions/Additional Requirements - -

| its su<br>agend<br>which<br>to be | cordance with 34 TAC §20.285(d)(1)(D)(iii), a respondent (prime contractor) may demonstrate good faith of boontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets by specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the agg subcontracted to HUBs with which the respondent does not have a continuous contract* in place for more the goal. This limitation is designed to encourage vendor rotation as recommended by the 2009 Texas Disparity Studies. | or exceeds the statewide HUB goal or the<br>the respondent must identify the HUBs with<br>regate percentage of the contracts expected<br>an five (5) years shall qualify for meeting the |
|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                          |
| SEC                               | TION 1: RESPONDENT AND REQUISITION INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                          |
| a.                                | Respondent (Company) Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State of Texas VID #:                                                                                                                                                                    |
|                                   | Point of Contact:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Phone #:                                                                                                                                                                                 |
|                                   | E-mail Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Fax #:                                                                                                                                                                                   |
| b.                                | Is your company a State of Texas certified HUB?   - Yes  - No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                          |

Bid Open Date:

(mm/dd/yyyy)

| Enter your company's name here: | Requisition #: |
|---------------------------------|----------------|
|                                 | -              |

### SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, **including contracted staffing, goods and services will be subcontracted**. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

- a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:
  - Yes, I will be subcontracting portions of the contract. (If Yes, complete Item b of this SECTION and continue to Item c of this SECTION.)
  - □ *No*, I will not be subcontracting <u>any</u> portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If *No*, continue to SECTION 3 and SECTION 4.)
- b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

|        |                                                                     | HUBs                                                                                                                                                     |                                                                                                                                                   | Non-HUBs                                                             |
|--------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| Item # | Subcontracting Opportunity Description                              | Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to non-HUBs. |
| 1      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 2      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 3      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 4      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 5      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 6      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 7      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 8      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 9      |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 10     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 11     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 12     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 13     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 14     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
| 15     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |
|        | Aggregate percentages of the contract expected to be subcontracted: | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                    |

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at <a href="https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php">https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php</a>).

- c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.
  - Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
  - No (If No, continue to Item d, of this SECTION.)
- d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract\* in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."
  - Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
  - No (If No, continue to SECTION 4 and complete an "HSP Good Faith Effort Method B (Attachment B)" for each of the subcontracting opportunities you listed.)

\*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

| Enter your company's name here: | Requisition #: |
|---------------------------------|----------------|
|                                 | -              |

### SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS (CONTINUATION SHEET)

This page can be used as a continuation sheet to the HSP Form's page 2, Section 2, Item b. Continue listing the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

|        |                                                                     | HUBs                                                                                                                                                     |                                                                                                                                                   | Non-HUBs                                                                   |
|--------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Item # | Subcontracting Opportunity Description                              | Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for more than five (5) years. | Percentage of the contract<br>expected to be subcontracted<br>to non-HUBs. |
| 16     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 17     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 18     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 19     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 20     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 21     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
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| 25     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
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| 35     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
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| 37     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 38     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 39     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 40     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 41     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 42     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| 43     |                                                                     | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |
| •      | Aggregate percentages of the contract expected to be subcontracted: | %                                                                                                                                                        | %                                                                                                                                                 | %                                                                          |

\*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

| Enter your company's name here:                                                                                                            |                                                                                                                                                                                                                                   | Requisition #:                                                    |                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------|
|                                                                                                                                            | FICATION (If you responded "No" to SECTION 2, Item space provided below explain how your company                                                                                                                                  |                                                                   |                                                              |
| materials and/or equipment.                                                                                                                |                                                                                                                                                                                                                                   |                                                                   |                                                              |
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|                                                                                                                                            |                                                                                                                                                                                                                                   |                                                                   |                                                              |
| SECTION 4: AFFIRMATION                                                                                                                     |                                                                                                                                                                                                                                   |                                                                   |                                                              |
|                                                                                                                                            | at I am an authorized representative of the responder is true and correct. Respondent understands and a                                                                                                                           |                                                                   |                                                              |
| contract. The notice must specify at a mir<br>subcontracting opportunity they (the subcon<br>the total contract that the subcontracting op | as practical to all the subcontractors (HUBs and Name and its pointractor) will perform, the approximate dollar value of portunity represents. A copy of the notice required ten (10) working days after the contract is awarded. | nt of contact for the contract, the subcontracting opportunity of | he contract award number, the and the expected percentage of |
| compliance with the HSP, including the                                                                                                     | npliance reports (Prime Contractor Progress Asset use of and expenditures made to its subcott g/docs/hub-forms/ProgressAssessmentReportForm                                                                                       | ntractors (HUBs and Non-HUB                                       |                                                              |
| subcontractors and the termination of a subc                                                                                               | the contracting agency prior to making any modific<br>contractor the respondent identified in its HSP. If the<br>forcement remedies available under the contract or                                                               | HSP is modified without the con                                   | stracting agency's prior approval,                           |
|                                                                                                                                            | the contracting agency to perform on-site reviews o mentation regarding staffing and other resources.                                                                                                                             | f the company's headquarters ar                                   | nd/or work-site where services                               |
| Signature                                                                                                                                  | Printed Name                                                                                                                                                                                                                      | Title                                                             | <br>Date<br>(mm/dd/yyyy)                                     |

### Reminder:

- If you responded "Yes" to SECTION 2, Items c or d, you must complete an "HSP Good Faith Effort Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.
- If you responded "No" SECTION 2, Items c and d, you must complete an "HSP Good Faith Effort Method B (Attachment B)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.

## HSP Good Faith Effort - Method A (Attachment A)

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| Enter your company's name here: | Requisition #:                        |
|---------------------------------|---------------------------------------|
|                                 | · · · · · · · · · · · · · · · · · · · |

*IMPORTANT*: If you responded "*Yes*" to **SECTION 2, Items c** or **d** of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed in **SECTION 2, Item b** of the completed HSP form. You may photo-copy this page or download the form at <a href="https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-a.pdf">https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-a.pdf</a>

### SECTION A-1: SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: Description:

### SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <a href="http://mvcpa.cpa.state.tx.us/tpasscmblsearch/index.jsp.">http://mvcpa.cpa.state.tx.us/tpasscmblsearch/index.jsp.</a> HUB status code "A" signifies that the company is a Texas certified HUB.

| Company Name | Texas certified HUB | Texas VID or federal EIN Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank. | Approximate<br>Dollar Amount | Expected<br>Percentage of<br>Contract |
|--------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------|
|              | - Yes - No          | ·                                                                                                                                     | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          | _                                                                                                                                     | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          | ·                                                                                                                                     | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          | _                                                                                                                                     | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |
|              | - Yes - No          |                                                                                                                                       | \$                           | %                                     |

**REMINDER:** As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to <u>all</u> the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract <u>no later than ten (10) working days</u> after the contract is awarded.

# HSP Good Faith Effort - Method B (Attachment B)

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| Enter your company's name here: | Requisition #: |
|---------------------------------|----------------|
|                                 |                |

**IMPORTANT:** If you responded "**No**" to **SECTION 2**, **Items c** and **d** of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method B (Attachment B)" for <u>each</u> of the subcontracting opportunities you listed in **SECTION 2**, **Item b** of the completed HSP form. You may photo-copy this page or download the form at <a href="https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-b.pdf">https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-b.pdf</a>.

### SECTION B-1: SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: Description:

### SECTION B-2: MENTOR PROTÉGÉ PROGRAM

If respondent is participating as a Mentor in a State of Texas Mentor Protégé Program, submitting its Protégé (Protégé must be a State of Texas certified HUB) as a subcontractor to perform the subcontracting opportunity listed in **SECTION B-1**, constitutes a good faith effort to subcontract with a Texas certified HUB towards that <u>specific</u> portion of work.

Check the appropriate box (Yes or No) that indicates whether you will be subcontracting the portion of work you listed in SECTION B-1 to your Protégé.

- Yes (If Yes, continue to SECTION B-4.)
- No / Not Applicable (If No or Not Applicable, continue to SECTION B-3 and SECTION B-4.)

### SECTION B-3: NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you <u>MUST</u> comply with items <u>a</u>, <u>b</u>, <u>c</u> and <u>d</u>, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs <u>and</u> trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at <a href="https://www.comptroller.texas.gov/purchasing/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf">https://www.comptroller.texas.gov/purchasing/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf</a>.

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs <u>and</u> trade organizations or development centers. Also, be mindful that a working day is considered a normal business day of a state agency, not including weekends, federal or state holidays, or days the agency is declared closed by its executive officer. The initial day the subcontracting opportunity notice is sent/provided to the HUBs <u>and</u> to the trade organizations or development centers is considered to be "day zero" and does not count as one of the seven (7) working days.

- a. Provide written notification of the subcontracting opportunity you listed in SECTION B-1, to three (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at least seven (7) working days to respond to the notice prior to you submitting your bid response to the contracting agency. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) Historically Underutilized Business (HUB) Directory Search located at <a href="http://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp">http://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp</a>. HUB status code "A" signifies that the company is a Texas certified HUB.
- **b.** List the <u>three (3)</u> Texas certified HUBs you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Texas Vendor Identification (VID) Number, the date you sent notice to that company, and indicate whether it was responsive or non-responsive to your subcontracting opportunity notice.

| Company Name | Texas VID (Do not enter Social Security Numbers.) | Date Notice Sent<br>(mm/dd/yyyy) | Did the HUB Respo | ond? |
|--------------|---------------------------------------------------|----------------------------------|-------------------|------|
|              |                                                   |                                  | - Yes -           | - No |
|              |                                                   |                                  | - Yes .           | - No |
|              |                                                   |                                  | - Yes             | - No |

- c. Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to two (2) or more trade organizations or development centers in Texas to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to trade organizations or development centers at least seven (7) working days prior to submitting your bid response to the contracting agency. A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program's webpage at <a href="https://www.comptroller.texas.gov/purchasing/vendor/hub/resources.php">https://www.comptroller.texas.gov/purchasing/vendor/hub/resources.php</a>.
- d. List two (2) trade organizations or development centers you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

| Trade Organizations or Development Centers | Date Notice Sent<br>(mm/dd/yyyy) | Was the Notice | Accepted? |
|--------------------------------------------|----------------------------------|----------------|-----------|
|                                            |                                  | - Yes          | - No      |
|                                            |                                  | - Yes          | - No      |

# HSP Good Faith Fffort - Method B (Attachment B) Cont.

| Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are complete attachment.  a. Enter the item number and description of the subcontracting opportunity for which you are completing this Attachment B continuation page. Item Number: Description:  b. List the subcontractor(s) you selected to perform the subcontracting opportunity you listed in SECTION B-1. Also identify whether they are a Texas centre HUB and their Texas Vendor Identification (VID) Number or federal Emplioyer Identification Number (EIN), the approximate dollar value of the work subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensury ou use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search location http://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp. HUB status code "A" signifies that the company is a Texas certified HUB.  Company Name  Texas certified HUB  Texas VID or federal EIN Do not enter Scala Security Numbers (Contralized Manument Percental Contralized Manument P |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Texas certified HUB  Texas certified HUB  Texas VID or federal EIN Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.  - Yes - No \$  - Yes - No \$  - Yes - No \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| - Yes - No \$ - Yes - No \$ - Yes - No \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| - Yes - No \$ - Yes - No \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 111                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| V No 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| - Yes - No \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

**REMINDER:** As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity it (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.

Rev. 2/17



# **HUB Subcontracting Opportunity Notification Form**

In accordance with Texas Gov't Code, Chapter 2161, each state agency that considers entering into a contract with an expected value of \$100,000 or more shall, before the agency solicits bids, proposals, offers, or other applicable expressions of interest, determine whether subcontracting opportunities are probable under the contract. The state agency I have identified below in Section B has determined that subcontracting opportunities are probable under the requisition to which my company will be responding.

34 Texas Administrative Code, §20.285 requires all respondents (prime contractors) bidding on the contract to provide notice of each of their subcontracting opportunities to at least <a href="https://exas.certified-HUBs">https://exas.certified-HUBs</a> (who work within the respective industry applicable to the subcontracting opportunity), and allow the HUBs <a href="https://exas.certified-HUBs">at least seven (7)</a> working days to respond to the notice prior to the respondent submitting its bid response to the contracting agency. In addition, <a href="https://exas.certified-HUBs">at least seven (7)</a> working days prior to submitting its bid response to the contracting agency, the respondent must provide notice of each of its subcontracting opportunities to <a href="https://exas.certified-HUBs">two (2)</a> or more trade organizations or development centers (in Texas) that serves members of groups (i.e., Asian Pacific American, Black American, Hispanic American, Native American, Woman, Service Disabled Veteran) identified in Texas Administrative Code §20.282(19)(C).

We respectfully request that vendors interested in bidding on the subcontracting opportunity scope of work identified in Section C, Item 2, reply no later than the date and time identified in Section C, Item 1. Submit your response to the point-of-contact referenced in Section A.

| dentified in Section C, item 1. Submit your response to the point-or-contact referenced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | in Section A.                                                                                                                    |                                                                 |                                                                                             |                                                                        |                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| SECTION A: PRIME CONTRACTOR'S INFORMATION  Company Name: Point-of-Contact: E-mail Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                  |                                                                 | State of T                                                                                  | exas VID #: _<br>Phone #: _<br>Fax #: _                                |                                                                                     |
| SECTION B: CONTRACTING STATE AGENCY AND REQUISITION IN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | NFORMATION                                                                                                                       |                                                                 |                                                                                             |                                                                        |                                                                                     |
| Agency Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                  |                                                                 |                                                                                             |                                                                        |                                                                                     |
| Point-of-Contact:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                  |                                                                 |                                                                                             | Phone #:                                                               |                                                                                     |
| Requisition #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                  |                                                                 | Bid C                                                                                       | pen Date:                                                              |                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                  |                                                                 |                                                                                             |                                                                        | (mm/dd/yyyy)                                                                        |
| 1. Potential Subcontractor's Bid Response Due Date:  If you would like for our company to consider your company's                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                  | ontracting                                                      |                                                                                             |                                                                        |                                                                                     |
| we must receive your bid response no later than                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Central Time                                                                                                                     | _ on                                                            | Date (mm/dd/yyyy)                                                                           | _·                                                                     |                                                                                     |
| In accordance with 34 TAC §20.285, each notice of subcontracting opportunity least seven (7) working days to respond to the notice prior to submitting our bid to us submitting our bid response to the contracting agency, we must provorganizations or development centers (in Texas) that serves members of gamerican, Woman, Service Disabled Veteran) identified in Texas Administrati (A working day is considered a normal business day of a state agency, not inby its executive officer. The initial day the subcontracting opportunity notice is is considered to be "day zero" and does not count as one of the seven (7) words.  2. Subcontracting Opportunity Scope of Work: | response to the covide notice of eac<br>groups (i.e., Asian<br>ive Code, §20.282(<br>cluding weekends,<br>as sent/provided to to | ntracting a<br>h of our s<br>Pacific A<br>(19)(C).<br>federal o | gency. In addition, as<br>ubcontracting oppor<br>merican, Black Ame<br>state holidays, or d | t least seven (7<br>tunities to two<br>rican, Hispani<br>ays the agenc | 7) working days prior to (2) or more trade ic American, Native y is declared closed |
| 3. Required Qualifications:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                  |                                                                 |                                                                                             |                                                                        | - Not Applicable                                                                    |
| 4. Bonding/Insurance Requirements:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                  |                                                                 |                                                                                             |                                                                        | - Not Applicable                                                                    |
| 5. Location to review plans/specifications:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                  |                                                                 |                                                                                             |                                                                        | - Not Applicable                                                                    |

| NAME/ADDRESS                                                                                   | HUB |
|------------------------------------------------------------------------------------------------|-----|
| Asian Contractor Association                                                                   |     |
| Website: www.acta-austin.com                                                                   |     |
| Phone: 512-926-5400                                                                            |     |
| Fax: 512-926-5410                                                                              |     |
|                                                                                                |     |
| Southwest Minority Supplier Development Council                                                |     |
| Website: www.smsdc.org                                                                         |     |
| Phone: 512-386-8766                                                                            |     |
| Fax: 512-386-8988                                                                              |     |
|                                                                                                |     |
| Dallas/Fort Worth Minority Supplier Development Council                                        |     |
| Website: http://affiliate.nmsdc.org/dfwmsdc                                                    |     |
| Phone: 214-630-0747                                                                            |     |
| Fax: 214-637-2241                                                                              |     |
| Houston Minority Supplier Development Council                                                  |     |
| Website: www.hmsdc.org                                                                         |     |
| Contact: Angela Freeman                                                                        |     |
| 713-271-7805                                                                                   |     |
| Fax: 713-271-9770                                                                              |     |
|                                                                                                |     |
| Tri-County Black Chamber of Commerce                                                           |     |
| Website: http://www.tcbcc.org                                                                  |     |
| Phone: 832-875-3977                                                                            |     |
| Fax: 713-839-7329                                                                              |     |
|                                                                                                |     |
| Women's Business Council – Southwest                                                           |     |
| Website: http://www.wbcsouthwest.org                                                           |     |
| Contact: Taylor Crosby                                                                         |     |
| Phone: 817-299-0566                                                                            |     |
| Mamoria Dusingas Enternsias Allianas                                                           |     |
| Women's Business Enterprise Alliance                                                           |     |
| Website: <a href="http://www.wbea-texas.org">http://www.wbea-texas.org</a> Phone: 713-681-9232 |     |
| PHONE. / 13-001-9232                                                                           |     |
| Golden Triangle Minority Business Council                                                      |     |
| Website: www.gtmbc.com                                                                         |     |
| PH: 409-962-8530                                                                               |     |
| FX: 409-722-5402                                                                               |     |
| 178. 100 722 0102                                                                              |     |
|                                                                                                | 1   |

| Hispanic Contractors Association de San Antonio                                                                                                                                                                                                                                                                                      |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Website: www.hcadesa.org                                                                                                                                                                                                                                                                                                             |           |
| PH: 210-444-1100                                                                                                                                                                                                                                                                                                                     |           |
| FX: 210-444-1101                                                                                                                                                                                                                                                                                                                     |           |
| 1 A. 210-444-1101                                                                                                                                                                                                                                                                                                                    |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| US Pan Asian American Chamber of Commerce                                                                                                                                                                                                                                                                                            |           |
| Website: www.uspaacc-sw.org                                                                                                                                                                                                                                                                                                          |           |
| PH: 682-367-1393                                                                                                                                                                                                                                                                                                                     |           |
| FX: 817-469-9485                                                                                                                                                                                                                                                                                                                     |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| El Paso Hispanic Chamber of Commerce                                                                                                                                                                                                                                                                                                 |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| Website: www.ephcc.org                                                                                                                                                                                                                                                                                                               |           |
| PH: 915-566-4066                                                                                                                                                                                                                                                                                                                     |           |
| FX: 915-566-9714                                                                                                                                                                                                                                                                                                                     |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| Regional Hispanic Contractors Association (RHCA)                                                                                                                                                                                                                                                                                     |           |
| Website: www.tamacc.org                                                                                                                                                                                                                                                                                                              |           |
| PH: 972-786-0909                                                                                                                                                                                                                                                                                                                     |           |
| FX: 972-786-0910                                                                                                                                                                                                                                                                                                                     |           |
| 17X. 372-700-0310                                                                                                                                                                                                                                                                                                                    |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| T                                                                                                                                                                                                                                                                                                                                    |           |
| Texas Association of Mexican American Chambers of Commerce (TAMACC)                                                                                                                                                                                                                                                                  |           |
| Website: www.tamacc.org                                                                                                                                                                                                                                                                                                              |           |
| Contact: Pauline Anton                                                                                                                                                                                                                                                                                                               |           |
| Phone: 512-444-5727                                                                                                                                                                                                                                                                                                                  |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
| START SELECTED VENDORS HERE                                                                                                                                                                                                                                                                                                          |           |
|                                                                                                                                                                                                                                                                                                                                      |           |
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|                                                                                                                                                                                                                                                                                                                                      |           |
| Genesis Telecom, Inc.                                                                                                                                                                                                                                                                                                                | WO/E      |
| Genesis Telecom, Inc.<br>2855 Mangum                                                                                                                                                                                                                                                                                                 | WO/F      |
| Genesis Telecom, Inc.<br>2855 Mangum<br>Houston, TX 77092                                                                                                                                                                                                                                                                            | WO/F      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse                                                                                                                                                                                                                                                    | WO/F      |
| Genesis Telecom, Inc.<br>2855 Mangum<br>Houston, TX 77092                                                                                                                                                                                                                                                                            | WO/F      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse                                                                                                                                                                                                                                                    | WO/F      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse                                                                                                                                                                                                                                                    | WO/F      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415                                                                                                                                                                                                                                       | WO/F      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc.                                                                                                                                                                                                 |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204                                                                                                                                                                    | WO/F AS/M |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338                                                                                                                                             |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang                                                                                                                                 |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338                                                                                                                                             |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang                                                                                                                                 |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang                                                                                                                                 |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036                                                                                                                    | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC                                                                               |           |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036                                                                                                                    | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E                                            | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039                        | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose              | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039                        | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose              | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose              | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose              | AS/M      |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose 214-339-2380 | AS/M BL/M |
| Genesis Telecom, Inc. 2855 Mangum Houston, TX 77092 Debra Schindler-Boultinghouse 713-868-5415  Biway International Technology, Inc. 5803 Sovereign Dr, suite 204 Houston, TX 77036-2338 Joseph Wang 713-271-4036  Merritt Communications Systems, LLC 222 W Las Colinas Blvd Suite 1650E Irving, Texas 75039 Eric Rose              | AS/M      |

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| SEGUIN, TX 78155-6664                               |        |
|-----------------------------------------------------|--------|
| JONATHAN HARDT<br>512-363-6453                      |        |
| 312-303-0433                                        |        |
|                                                     |        |
| Other In Notice of Control                          | D1 /84 |
| Stack Network Solutions 3817 Portsmouth Cir         | BL/M   |
| Plano, TX 75023-5915                                |        |
| Jennifer Pekney<br>708-969-1830                     |        |
|                                                     |        |
|                                                     |        |
| Westar Corporation 6335 Camp Bullis Rd Suite 24     | HI/M   |
| San Antonio, TX 78257-9722                          |        |
| Edward Flores<br>888-905-208                        |        |
|                                                     |        |
| Digital Resources, Inc.                             | WO/F   |
| 2107 Greenbriar Dr Suite B                          | VVO/F  |
| Southlake, TX 76092                                 |        |
| Wendy Bock<br>817-481-9300                          |        |
|                                                     |        |
| СТІ                                                 |        |
| 4464 W 12 <sup>th</sup> Street<br>Houston, TX 77055 |        |
| Anthony Fevola                                      |        |
| 281-503-1873                                        |        |
|                                                     |        |
|                                                     |        |
|                                                     |        |
| Proodoost Works                                     |        |
| Broadcast Works<br>20980 FM 2493                    |        |
| Bullard, TX 75757                                   |        |
| Brian Ashcraft<br>903-509-2470 ext 106              |        |
|                                                     |        |
| SAT Padia Communications LTD                        |        |
| SAT Radio Communications, LTD. 1019 E Euclid Ave    |        |
| San Antonio, TX 78212-4505                          |        |
| Amy Gollinger<br>210-226-3682                       |        |
|                                                     |        |
|                                                     |        |

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| Ford-Audio-Video Systems, LLC<br>4800 W I 40 Service Rd<br>Oklahoma City, OK 73128-1208<br>Kevin Ray<br>405-945-2093 |  |
|----------------------------------------------------------------------------------------------------------------------|--|
|                                                                                                                      |  |
| Ross Video Inc. 808 Commerce Park Ogdensburg NY 13669 Harry Friedman 972-539-1030                                    |  |