514 Glover Street Marietta, GA 30060 Telephone: (770) 426-3300 www.cobbk12.org

One Team, One Goal: Student Success PROCUREMENT SERVICES DEPARTMENT

Attn: Bid/Quote Department Date: 4/12/2022

From: Lori Franji

Email: lori.franji@cobbk12.org Phone: 770-426-3364

Request for Quote (RFQ) Q2022033

For

Library Supplies

Due Date/Time/Location for Quote Response: Please e-mail quotation responses to lori.franji@cobbk12.org by 4/19/22 at 3:00 p.m. ET

Delivery Location for Product/Service: Various Cobb County Schools and Departments. (see attached list on pages 20-22)

The Cobb County School District (CCSD) Procurement Services Department General Terms and Conditions are hereby acknowledged, understood, and agreed to by the parties and are hereby fully incorporated into the solicitation document and the resulting contract. Refer to the CCSD Procurement Services website for the complete General Terms and Conditions. Go to www.cobbk12.org. From this screen, select "Menu", select "Departments", choose "Procurement Services" under Purchasing Resources and find the link to "General Terms and Conditions" located in the center of the page.

NOTICE as to all Cobb County School District premises: Any person entering the premises waives all civil liability against this premises owner and operator for any injuries caused by the inherent risk associated with contracting COVID-19 at public gatherings, except for gross negligence, willful and wanton misconduct, reckless infliction of harm, or intentional infliction of harm, by the individual or entity of the premises. (O.C.G.A. § 51-16-3).

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

Should these Special Terms and Conditions conflict with the General Terms and Conditions, the Special Terms and Conditions will control.

1.0 PURPOSE

Cobb County School District (CCSD) is seeking qualified vendors to deliver Library Supplies to various CCSD schools and departments using catalog discount pricing. Delivery will be on an as needed basis. Expenditures during the length of this contract are estimated to be approximately \$45,000.

1.1 OWNER'S REPRESENTATIVE

Supervision of and monitoring performance of the contract will be performed by CCSD's representative Holly Frilot Supervisor, Library Media Education at 770-426-3315, or her designee.

2.0 SCOPE OF WORK

- **2.1** Vendors are to indicate a percentage discount off catalog prices on the Quote Form for library supplies. Also, include a description of any additional discounts offered.
- **2.2** Catalog discounts must not require a minimum order.
- **2.3** All purchases under this contract are on an as needed basis. No quantities or purchases will be guaranteed.
- 2.4 Delivery service must include unloading and inside delivery to the location stated on each order. Items are to be placed inside the building in an area designated by an authorized representative of the CCSD. Please note that many facilities do not have loading docks and may require a delivery vehicle with liftgate.
- 2.5 All packaging materials to be removed from the school. CCSD dumpsters must not be used to discard packing materials or job-related debris.
- 2.6 Deliveries of items should be made within the time frame listed on the Quote Form. In the event an order cannot ship complete within the time frame, for reasons such as manufacturer delay or weather related, the CCSD representative listed on purchase order must be notified. Documentation may be requested by CCSD for detailed reasons pertaining to the delay. CCSD may terminate the contract with a vendor that has repeated late deliveries.

- 2.7 For Procurement Card orders, the cost of items may only be charged to the card after the items are shipped. For Purchase Orders, payment is made after final shipment is completed.
- **2.8** Vendor(s) must have an on-line ordering system that includes descriptions and pricing of all items. Each item should indicate whether it is discounted or non-discounted. The final price listed on the website should include discounts when placing order on-line.
- 2.9 Products delivered must be of good quality. CCSD may terminate a vendor for providing low quality items. CCSD reserves the right to determine the quality standards of the products that are received.

3.0 COMMUNICATIONS WITH CCSD STAFF

All communications concerning this RFQ must be submitted in <u>writing</u> to the CCSD Procurement Services Department. Email to <u>lori.franji@cobbk12.org</u> is the preferred method of communication. Only written questions submitted via email will be accepted. Only written responses distributed by the Procurement Services Department will be binding upon CCSD. The Procurement Services Department, in its discretion, may call upon user departments for clarification in their area of expertise. Questions concerning this solicitation must be received by 3:00 PM ET on Friday, April 15, 2022. Answers will be posted to the CCSD Current Solicitations website tentatively by Monday, April 18, 2022.

4.0 SUBMISSION OF RESPONSES

- **4.1** All responses submitted become the property of the CCSD and are subject to the applicable open records policies and laws.
- **4.2** Submit the following documents with your response:
 - **4.2.1** Vendor Questionnaire
 - **4.2.2** IRS W-9 Form
 - **4.2.3** Georgia Security and Immigration Compliance Act Forms
 - **4.2.4** Disclosure of Lobbying Activities Form (if applicable)
 - **4.2.5** Acknowledgement and Agreement Form
 - **4.2.6** Quote Form

5.0 <u>COST</u>

5.1 Unless specifically consented to in writing by CCSD, prices must remain firm for one year from the award date, or for any renewal period, under the same terms and conditions as the RFQ. The CCSD reserves the option to renew any contract award at its sole discretion.

- 5.2 Quantities/amounts shown in this RFQ are estimates. Vendors are advised that the actual number purchased/required may vary from those in the RFQ, depending upon the needs of the CCSD and the availability of funds.
- **5.3** Quotes that contain minimum order amounts will not be accepted unless called for in the solicitation document.
- **5.4** Pricing must be submitted on the Quote Form included within this document as requested, without conditions unless called for within the solicitation document.
- **5.5** For Goods: Quotations must include all delivery and/or installation charges. Delivery and/or installation requirements will be as specified in the solicitation document.
- **5.6** Prompt payment discounts will be considered for quote evaluation and award.
- **5.7** The CCSD does not pay late payment fees, interest, or attorneys' fees.
- 5.8 Vendors should have the ability to accept procurement (credit) cards and purchase orders. Pricing must reflect this and remain firm with no additional charges for using either method. The successful vendor(s) will be responsible for providing usage reports and procurement card activity reports quarterly or upon request by CCSD.

5.9 **FEE STRUCTURE FOR ADDITIONAL ITEMS**

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

6.0 **INSURANCE REQUIREMENTS**

- **6.1** Commercial General Liability with limits of at least \$1 Million. Coverage must include products and completed operations with reporting of claims on an occurrence basis.
- **6.2** Commercial Auto Liability with limits of at least \$1 Million.
- **6.3** Umbrella Coverage in excess of GL and Auto of at least \$1 Million.
- **6.4** Statutory Workers' Compensation

- **6.5** Employer's Liability of at least \$100,000.00.
- **6.6** Vendor's insurance carrier must have financial size category of at least V.

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

Please Note:

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

7.0 <u>ESCALATION/DE-ESCALATION CLAUSE</u>

All prices offered shall be firm against any increase for one (1) year from the effective date of the contract. Before renewal, CCSD may entertain a request for escalation in accordance with the most recently published **Producer Price Index** at the time of the request. For this section, **PPI Index WPU3311**, **Publishing sales**, **excluding software**, as published by the United States Department of Labor, Bureau of Labor Statistics will be the benchmark. CCSD reserves the right to accept or reject the request for a price increase and, if appropriate, to utilize other resources in evaluating escalation requests. CCSD may entertain a request for escalation during the contract period if the current market conditions and prices at the time of the request have changed significantly. Documentation may be requested by CCSD that provides detailed information about the change in market conditions and prices. If the price change is approved, the price will remain firm for **365** days from the date of the increase unless otherwise stated in the renewal award letter. This clause also enables CCSD to seek de-escalation based on the same cited index, terms, and other resources.

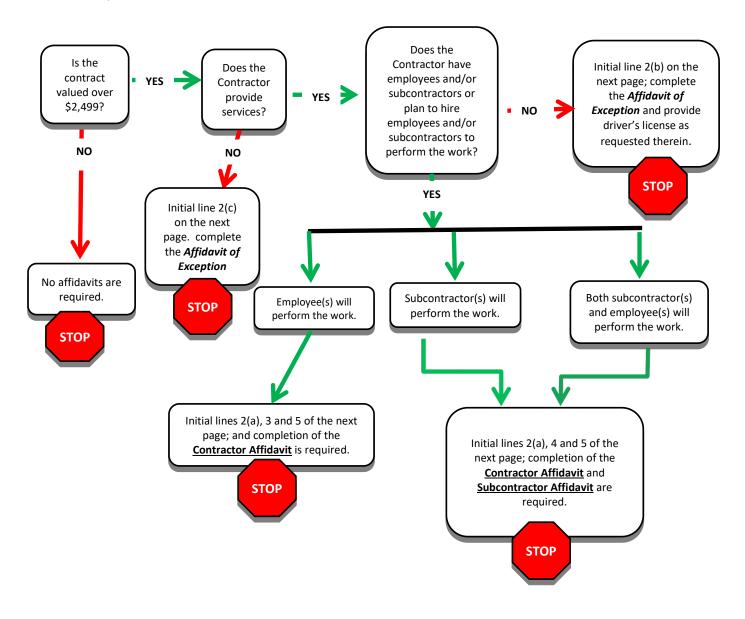
AWARDS

- **7.1** Award will be made to the lowest responsive and responsible vendor meeting specifications and requirements. This is the vendor who submits the lowest price, whose quote meets the specifications, terms, and conditions outlined in the RFQ, and who is clearly capable of delivering the products or services specified. Therefore, the lowest responsible vendor will not always be the vendor who has submitted the lowest monetary quote.
- The CCSD reserves the right to accept or reject any part of a submitted quotation, to accept the entire quote from one vendor, to accept portions of the quote from several vendors, or to reject all quotations submitted or waive any minor irregularity. The CCSD reserves the right to consider current and past experience with a vendor and to award in the best interest of the CCSD. The CCSD reserves the right to award by line item, to more than one vendor, and/or to award by group or any combination thereof.
- **7.3** The award for this contract will/may be made to multiple vendors. All purchases and services under this contract are on an as-needed basis. No quantities or vendor purchases are guaranteed.

GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

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

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



GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

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

TO ALL PROSPECTIVE CONTRACTORS:

Company Name:

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

1)	The seq.	Cobb County School District shall comply with the Georgia Security and Immigration Compliance Act, as amended, O.C.G.A. § 13-10-90 et
2)	Imm	rder to ensure compliance with the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603 and the Georgia Security and higration Compliance Act of 2006, as amended by the Illegal Immigration Reform Act of 2011, O.C.G.A. § 13-10-90 et seq. (collectively the ") the contractor ("Contractor") MUST INITIAL the statement applicable to Contractor below:
	(a)	[Initial here] Contractor represents and warrants that Contractor has registered at https://e-verify.uscis.gov/enroll/ to verify information of all new employees in order to comply with the Act; is authorized to use and uses the federal authorization program; and will continue to use the authorization program throughout the contract period. Contractor further represents, warrants and agrees that it shall execute and return any and all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-101 et seq. in accordance with the terms thereof; (Complete and submit the Contractor Affidavit and Agreement); OR
	(b)	(Initial here) The Contractor is a sole proprietor with no employees, subcontractors, or sub-subcontractors, and it will not use or hire employees, subcontractors, or sub-subcontractors for any work performed for the District under the contract. This requires submission of a Georgia driver's license or a license from an approved state. (Complete and submit the Affidavit of Exception); OR
	(c)	(Initial here) The Contractor will provide goods only to the District and will not render any services to the District. If your company provides goods along with ancillary services, such as maintenance, repairs, help desk support, customer support, technological support, or any other ancillary services, your company cannot file an Affidavit of Exception and must register with E-Verify. (Complete and submit the Affidavit of Exception); OR
	(d)	(Initial here) The Contractor is a foreign company and the work performed under the contract will be done in a foreign country by residents of that country. Contractor must comply with any other laws required to perform services in the United States, including but not limited to having an appropriate visa. (Complete and submit the Affidavit of Exception); OR
	(e)	(Initial here) The Contractor is an individual who is licensed pursuant to Official Code of Georgia Title 26 or Title 43, or by the State Bar of Georgia; whose license is in good standing, and the Contractor is the individual who will be performing the services under the contract. (Complete and submit the Affidavit of Exception)
3)		(Initial here) Contractor will not employ or contract with any subcontractor in connection with a covered contract unless the subcontractor is registered, is authorized to use, and uses the federal work authorization program and provides Contractor with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-1-01 et seq.
4)		(Initial here) Contractor covenants and agrees that, if Contractor employs or contracts with any subcontractor in connection with the covered contract under the Act and DOL Rule 300-10-102, then in such event Contractor will secure from each subcontractor at the time of the subcontract, the subcontractor's name and address, the employer identification number/taxpayer identification number applicable to the subcontractor; the date the authorization to use the federal work authorization program was granted to subcontractor; the subcontractor's attestation of the subcontractor's compliance with the Act and Georgia Department of Labor Rule 300-10-12.; and the subcontractor's agreement not to contract with subcontractors unless the subcontractor is registered, authorized to use, and uses the federal work authorization program; and provides subcontractor with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-101 et seq. (Complete and submit the Subcontractor Affidavit and Agreement)
5)		(Initial here) Contractor agrees to provide the Cobb County School District with all affidavits of compliance as required by the Act and Georgia Department of Labor Rule 300-10-102, 300-10-103, 300-10-107 and 300-10-108 within five (5) business days of its receipt of any such documents.

GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

CONTRACTOR AFFIDAVIT PROVIDED PURSUANT TO O.C.G.A. § 13-10-91(b)(1)

The undersigned contractor ("Contractor") executes this Affidavit to comply with O.C.G.A § 13-10-91 related to any contract to which Contractor is a party that is subject to O.C.G.A. § 13-10-91 and hereby verifies its compliance with O.C.G.A. § 13-10-91, attesting as follows:

- a) The Contractor has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program;
- b) The Contractor will continue to use the federal work authorization program throughout the contract period, including any renewal or extension thereof;
- c) The Contractor will notify public employer Cobb County School District in the event the Contractor ceases to utilize the federal work authorization program during the contract period, including renewals or extensions thereof;
- d) The Contractor understands that ceasing to utilize the federal work authorization program constitutes a material breach of contract;
- e) The Contractor will contract for the performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the Contractor with the information required by O.C.G.A. § 13-10-91(a), (b), and (c);
- f) The Contractor acknowledges and agrees that this Affidavit shall be incorporated into any contract(s) subject to the provisions of O.C.G.A. § 13-10-91 for the project listed below to which Contractor is a party after the date hereof without further action or consent by Contractor; and
- g) Contractor acknowledges its responsibility to submit copies of any affidavits, drivers' licenses, and identification cards required pursuant to O.C.G.A. § 13-10-91 to public employer Cobb County School District within five (5) business days of receipt.

	Federal Work Authorization User Identification Number (4 to 7 Digit Number)			
	Date of Authorization			<u> </u>
	Name of Contractor			
	Email Address			
	Telephone Number			
	Name of Public Employer	Cobb County School District		
I hereby dec	lare under penalty of perjury that t	the foregoing is true and correct.		
Executed on		, 20 in	(city),	(state).
Signature of	Authorized Officer or Agent of Cor	ntractor		
Printed Nam	ne and Title of Authorized Officer o	 r Agent		
NOTARY INF	ORMATION and Sworn before me this the	day of, 20	Affix Notarial Seal Ho	ere
Notary Publi	c Signature			
My Commiss	sion Expires:			

GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

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

			
By executing this affidavit, the undersigned subc firm or corporation which is engaged in the phy- of contractor) on behalf of public employer <u>Co</u> authorization program commonly known as provisions and deadlines established in O.C. to use the federal work authorization progra physical performance of services in the per subcontractor with the information required sub-subcontractor's affidavit to the contractor its receipt of the same. If the undersigned sub- contracted sub-subcontractor, the undersigned together with copies of such affidavits, to the	sical performance of services und obb County School District, has r E-Verify, or any subsequent r G.A. § 13-10-91. Furthermore, tl m throughout the contract periformance of such contract onl by O.C.G.A. § 13-10-91(b), and or and School District, together ocontractor receives notice that ed subcontractor must forward,	er a contract withegistered with, is authorized to use eplacement program, in according to the undersigned subcontractor covord, that the undersigned subcontry with sub-subcontractors who put that the subcontractor shall forward with a copy of such affidavit, with a sub-subcontractor has received	(name e and uses the federal work ance with the applicable enants that it will continue ractor will contract for the present an affidavit to the ard notice of receipt of any in five (5) business days of an affidavit from any other
Subcontractor hereby attests that its federal wo	rk authorization user identification	n number and date of authorization	are as follows:
Federal Work Authorization			
User Identification Number			_
Date of Authorization			_
Name of Subcontractor			
Email Address			_
			-
Telephone Number			_
Name of Public Employer	Cobb County School District		_
I hereby declare under penalty of perjury that th	ne foregoing is true and correct.		
Executed on	_, 20 in	(city),	(state).
Signature of Authorized Officer or Agent of Subc	 contractor		
Printed Name and Title of Authorized Officer or	_ Agent		
NOTARY INFORMATION		Affix Notarial Seal Her	e
Subscribed and Sworn before me this the	day of, 20		
Notary Public Signature			
My Commission Expires:			

GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

AFFIDAVIT OF EXCEPTION PURSUANT TO O.C.G.A. § 13-10-91(b)(5)

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

- (a) I am a sole proprietor.
- (b) I do not employ any other persons.
- (c) I do not intend to hire any employees to perform the Contract.
- (d) A true, correct and complete copy of my state issued driver's license or state issued identification card is attached hereto.
- (e) If at any time hereafter I determine that I will need to hire employees to satisfy or complete the physical performance of services under the Contract, then <u>before</u> hiring any employees, I will:
 - (i.) Immediately notify the School District and all higher tier contractors (if any) in writing; and
 - (ii.) Register with, participate in and use, a federal work authorization program operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986, P.L. 99-603, in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-90; and
 - (iii.) Provide the School District with all affidavits required by O.C.G.A. § 13-10-90 et seq. and Georgia Department of Labor Rule 300-10-1-.01 et seq.; OR
- (f) The Contractor will provide **goods only** to the District and will not render any services to the District. If your company provides goods along with ancillary services, such as maintenance, repairs, help desk support, customer support, technological support, or any other ancillary service, your company cannot file an Affidavit of Exception and must register with E-Verify; OR
- (g) The Contractor is a foreign company, and the work performed under the contract will be done in a foreign country by residents of that country;
- (h) The Contractor is an individual who is licensed pursuant to Official Code of Georgia Title 26 or Title 43, or by the State Bar of Georgia; whose license is in good standing, and the Contractor is the individual who will be performing the services under the contract.

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

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

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

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

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

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

FORM (Rev. 5/17)

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

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

	(See bottom for pub	lic burden discl	losure.)	
1. Type of Federal Action:	2. Status of Federal A		3. Report Type:	
a. Contract	a. bid/offer/ap		a. initial filing	
b. grant	b. initial award	l	b. material change	
c. cooperative agreement	c. post-award		T. W. C. L. C. L.	
d. loan			For Material Change Only:	
e. loan guarantee			yearquarter	
f. loan insurance			date of last report	
4. Name and Address of Reporting E	ntity:	5. If Reporting	ng Entity in No. 4 is a Subawardee, Enter Name an	<u>а</u>
	awardee	Address of		
	r, if known:			
116	ı, ii kilowii.			
Congressional District, if known:		Congressional D		
6. Federal Department/Agency:		7. Federal Pro	ogram Name/Description:	
		NSLP		
		Code of Federal I	Domestic Assistance (CFDA) Number, if applicable:	
8. Federal Action Number , if known:			nount, if known:	
		\$		
10. a. Name and Address of Lobbying	Entity	b. Individuals	s Performing Services (including address if different from No	٥.
(if individual, last name, first name, M	Iiddle initial):	10.a.)		
		(last name, j	first name, middle initial):	
	(Attack Continuation Shoot)	 	~~~\	
	(Attach Continuation Sheet(s) SF-LLL-A ij necessa i	ury)	
11. Amount of Payment (check all that a	ipply):	13. Type of Pay	yment (check all that apply):	
\$ actu	al planned			
	<u> </u>	a. reta		
12. Form of Payment (check all that app	ly):		e-time fee	
a. cash		_	nmission	
		e. defe	ntingent fee	
b. in-kind; specify: nature _			er, specify:	
value		1. Ouic	ci, specify.	
14. Brief description of Services Perfor	med or to be Performed and	 Date(s) of Service	e, including officer(s), employee(s), or Member(s)	
contacted, for Payment indicated in		Date(s) of Service	e, including officer(s), employee(s), or includer(s)	
	(attach Continuation Sh	neet(s) SF-LLL-A, i	if necessary)	
45 Occidentational HAM III	V.,	1		
15. Continuation sheet(s) attached:	Yes No	J		
16. Information requested through this form is				
This disclosure of lobbying activities is a r			ure:	
reliance was placed by the tier above whe		entered		
into. This disclosure is required pursuant			lame:	
reported to the Congress semi-annually a		Jection.	iumo.	_
Any person who fails to file the required d				
of not less than \$10,000 and not more that	in \$ 100,000 for each such failure	. <u>Title:</u>		
		Teleph	none No.: Date:	
Federal Use Only:			Authorized for Local Reproduction Standard Form - LLL	

FORM (Rev. 5/17)

QUOTE FORM

Price: Pric	ing must be pro	vided on the form	n below in the forma	at requested.
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tem #	Description	Percentage Discoun
1	Catalog Discount for Library Supplies	
2	List any exceptions to the discount pricing:	
3	List shipping policy, including freight charges per delivery:	
4	List return policy, including any re-stocking fees:	
5	Per Section 5.9 of the Special Terms & Conditions, in the event CCSD has failed to include an item(s), responding vendors are asked to provide a fee structure for additional, related items that may be purchased during the award period. Vendors are to identify the pricing source and the associated fee structure in the space to the right. Some example responses are: X% discount below MSRP; X% discount below published catalog pricing; Cost plus X% mark-up.	
Web ad	dress for on-line ordering:	

VENDOR QUESTIONNAIRE

Cc	mpany Name:	_						
1.	Are any goods, excluding instructional materials or beverages for immediate consumption, purchased under this solicitation made in the State of Georgia? YES NO N/A					•		
	If yes, please identify bodistrict.					en verificatio	n as requ	uired by School
2.	. Provide complete contact information for each of the following. If no information is provide below, the information on the Acknowledgement and Agreement Form will be used.							
	NOTE: A	n IRS W-9 form	shou	ıld be subr	nitt	ed with resp	oonse.	
	Service Representative	This person will products, billing		•			uestions r	elated to
	Company Name:							
	Address:							
	City:			State:			Zip:	
	Contact Name:					·		
	Telephone:				F	ax:		
	Contact Email:							
		Purchase Order Address						
	Address:							
	City:			State:			Zip:	
	Contact Name:							
	Telephone:				F	ax:		
	Contact Email:							
	Indicate whether purchase	orders are to be sen	t via f	ax or email.		☐ Fax or	☐ Em	ail (preferred)
	PO Fax:	ı	PO Em	nail Address:				

Payment (Remit) Address								
Address:								
City:				State:			Zip:	
Contact Name:								
Telephone:					F	Fax:		
Contact Email:								
Checks should be ma	ide paya	ble to:						

CONFLICT OF INTEREST

ALL PROSPECTIVE VENDORS PLEASE READ CAREFULLY

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

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

BOARD MEMBERS:

David Chastain, Chairman

David Banks, Vice Chairman

Charisse Davis

Dr. Jaha Howard

Leroy Tre' Hutchins

Randy Scamihorn

Brad Wheeler

EXECUTIVE CABINET:

Chris Ragsdale, Superintendent

Dr. Kevin Daniel

John Floresta

Sherri Hill

Brad Johnson

Jennifer Lawson

Marc Smith

Keeli Bowen

ACKNOWLEDGEMENT AND AGREEMENT

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

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

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

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

Check all that apply: Addendum No. 1 _____, Addendum No. 2 ____, Addendum No. 3 _____,

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

Signing the Agreement affirms that the original Request for Quote document has not been altered in any way.

"NO QUOTE" REPLY FORM

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

If you choose not to respond to this RFQ, please complete this form and return via email to lori.franji@cobbk12.org.

Thank you for your cooperation.

"NO RESPONSE" REPLY FORM: RFQ Q2022033, Library Supplies

I hereby submit a "NO RESPONSE" to this RFQ for the reason(s) checked below:

	1. Specifications were unclear or restrictive.
	2. Could not meet bonding requirements.
	3. Our schedule will not permit us to respond.
	4. Terms & Conditions were unclear or restrictive.
	5. Could not meet specifications.
	6. Could not meet insurance requirements.
	7. Do not offer the goods or services requested.
	8. Cannot supply at this time.
	9. Cannot meet delivery schedule.
	10. Other/Remarks:
wish to	o remain on CCSD's vendor list for these goods/services: Yes No
Vendoi	Representative

School List

ELEMENTARY SCHOOLS

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

School List

ELEMENTARY SCHOOLS cont.

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

MIDDLE SCHOOLS

MIDDLE SCHOOLS			o:. =:
School Name	Phone	Address	City, Zip
Awtrey	770.975.6615	3601 Nowlin Road	Kennesaw, 30144
Barber	770.975.6764	4222 Cantrell Road	Acworth, 30101
Campbell	678.842.6873	3295 S. Atlanta Road	Smyrna, 30080
Cooper	770.819.2438	4605 Ewing Road	Austell, 30106
Daniell	678.594.8048	2900 Scott Road	Marietta, 30066
Dickerson	770.578.2710	855 Woodlawn Drive	Marietta, 30068
Dodgen	770.578.2726	1725 Bill Murdock Road	Marietta, 30062
Durham	770.975.6641	2891 Mars Hill Road NW	Acworth, 30101
East Cobb	770.578.2740	825 Terrell Mill Rd. SE	Marietta, 30067
Floyd	770.819.2453	4803 Floyd Road	Mableton, 30126
Garrett	770.819.2466	5235 Austell-Pwdr Sprgs Rd.	Austell, 30106
Griffin	678.842.6917	4010 King Springs Rd.	Smyrna, 30082
Hightower Trail	770.578.7225	3905 Post Oak Tritt Road	Marietta, 30062
Lindley - 6th Grade	770.819.2414	1550 Pebblebrook Circle	Mableton, 30126
Lindley - 7th & 8th	770.819.2496	50 Veterans Mem. Highway	Mableton, 30126
Lost Mountain	678.594.8224	700 Old Mountain Road	Kennesaw, 30152
Lovinggood	678.331.3015	3825 Luther Ward Road	Pwdr Sprgs, 30127
Mabry	770.928.5546	2700 Jims Road	Marietta, 30066
McCleskey	770.928.5560	4080 Maybreeze Road	Marietta, 30066
McClure	678.331.8131	3660 Old Stilesboro Road	Kennesaw, 30152
Palmer	770.591.5020	690 North Booth Road	Kennesaw, 30144
Pearson	770.429.6012	240 Barber Rd. SE	Marietta, 30060
Pine Mountain	678.594.8252	2720 Pine Mountain Circle	Kennesaw, 30152
Simpson	770.971.4711	3340 Trickum Road	Marietta, 30066
Smitha	678.594.8267	2025 Powder Springs Road	Marietta, 30064
Тарр	770.222.3758	3900 Macedonia Road	Pwdr Sprgs, 30127

School List

HIGH SCHOOLS

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School Name	Phone	Address	City, Zip
Allatoona	770.975.6503	3300 Dallas-Acworth Hwy NW	Acworth, 30101
Campbell	678.842.6850	5265 Ward Street	Smyrna, 30080
Cobb Horizon	678.594.8240	1765 The Exchange SE	Atlanta, 30339
Cobb Innovation and Technology Academy	678.594.8240	114 Windy Hill Rd	Marietta, 30060
Harrison	678.594.8104	4500 Due West Road	Kennesaw, 30152
Hillgrove	678.331.3961	4165 Luther Ward Road	Pwdr Sprgs, 30127
Kell	678.494.7844	4770 Lee Waters Road	Marietta, 30066
Kennesaw Mountain	678.594.8190	1898 Kennesaw-Due W. Road	Kennesaw, 30152
Lassiter	678.494.7863	2601 Shallowford Road	Marietta, 30066
McEachern	770.222.3710	2400 New Macland Road	Pwdr Sprgs, 30127
North Cobb	770.975.6685	3400 Old 41 Highway, North	Kennesaw, 30144
Osborne	770.437.5900	2451 Favor Road	Marietta, 30060
Pebblebrook	770.819.2521	991 Old Alabama Road	Mableton, 30126
Pope	770.578.7900	3001 Hembree Road	Marietta, 30062
South Cobb	770.819.2611	1920 Clay Road	Austell, 30106
Sprayberry	770.578.3200	2525 Sandy Plains Road	Marietta, 30066
Walton	770.578.3225	1590 Bill Murdock Road	Marietta, 30062
Wheeler	770.578.3266	375 Holt Road	Marietta, 30068

SPECIAL SCHOOLS AND PROGRAMS

School Name	Phone	Address	City, Zip
Adult Education Center	678.594.8011	1595 Hawthorne Ave.	Smyrna, 30080
Brown Professional Lrng. Ctr.	678-842-6930	3265 Brown Road	Smyrna, 30080
Cobb Mentoring Matters	678.581.6811	514 Glover St., Ste. 180 E	Marietta, 30060
Cobb Virtual Academy	678.581.6791	1595 Hawthorne Ave	Smyrna, 30080
Corporate Classroom	770.590.4506	514 Glover Street	Marietta, 30060
Devereaux Ackerman Academy	770.427.0147	1291 Stanley Road	Kennesaw, 30152
Early Learning Center	770-819-2483	5891 Dodgen Rd SW	Mableton, 30126
ESOL	770.426.3410	514 Glover St., Ste. B105	Marietta, 30060
H.A.V.E.N. at Sky View	770.819.2584	5805 Dunn Road	Mableton, 30126
Homeless Ed.	678.503.0173	514 Glover Street	Smyrna, 30080
International Welcome Center	678.331.3086	1870 Teasley Drive	Smyrna, 30080
Title I	770.437.5933	514 Glover Street	Marietta, 30060

OTHER CCSD FACILITIES

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