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| ETF logo | STATE OF WISCONSIN **Department of Employee Trust Funds**  **Robert J. Conlin**  SECRETARY | Wisconsin Department  of Employee Trust Funds  PO Box 7931  Madison WI 53707-7931  1-877-533-5020 (toll free)  Fax 608-267-4549  [etf.wi.gov](file:///\\accounts.wistate.us\etf\files\prod\Finance\Procurement\Contract-R\Contract\ETI%20FY2009%20&%20FY2019\ETI0002%20-%20RFI%20-%20Locating%20Beneficiaries\etf.wi.gov) |

Date: August 17, 2018

To: All Vendors

Subject: **Request for Information ETI0002 – Managing Address Information and Locating Persons for Distribution of Information and Payment of Wisconsin Retirement System (WRS) Benefits**

**Response Due: September 12, 2018 by 2:00 PM CDT**

The Wisconsin Department of Employee Trust Funds (ETF) is issuing this Request for Information to determine market availability of services to effectively and efficiently maintain current member address information and to provide professional research and investigative services to identify and locate persons who (1) are owners of abandoned WRS accounts, (2) are survivors or beneficiaries entitled to benefit payments, (3) are WRS members subject to minimum distribution requirements, and (4) are WRS members for whom the department does not have valid contact information.

Thank you in advance for your response.

Kristen Schipper

Purchasing Agent-Senior

Department of Employee Trust Funds

(608) 261-0737

[ETFSMBProcurement@etf.wi.gov](mailto:ETFSMBProcurement@etf.wi.gov)

**Request for Information ETI0002**

**Managing Address Information and Locating Persons for Distribution of Information and Payment of Wisconsin Retirement System (WRS) Benefits**

# Purpose & Background

ETF seeks information from consultants qualified to manage address information and locate persons for the purpose of paying them benefits.

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# Project Scope & Objectives

ETF seeks an innovative, strategic partner in the marketplace and may use this RFI to inform and develop a formal solicitation for services.

# Response Expectations

1. To quicken and simplify ETF’s review of responses and to ensure that each response receives the same orderly review, please enter your responses into the [Vendor Response Form](#Vendor_Response_Form).
2. Return responses via email to [ETFSMBProcurement@etf.wi.gov](mailto:ETFSMBProcurement@etf.wi.gov) no later than the due date and time specified on page 1 of this RFI. Make sure the e-mail’s subject line reads: **RFI ETI0002 – Response: [Responder’s Name].**
3. Responses will not be returned and become ETF’s property upon submission to ETF. DO NOT SUBMIT PROPRIETARY OR CONFIDENTIAL INFORMATION AS PART OF A RESPONSE.
4. Responses are voluntary and shall not bind either the respondent or ETF in any way. This RFI is issued solely for information and planning purposes, and does not constitute a solicitation. Responses to this RFI are not an offer and cannot be accepted by ETF to form a binding contract.
5. Responses to this RFI will be reviewed and may be used to further develop, change, alter or delete specifications, terms or conditions within a future solicitation. Providing a response to this RFI is not a prerequisite to submitting a proposal should ETF offer such an opportunity in the future. The contents of responses to this RFI will not be considered in the review or evaluation of future bids or proposals.
6. ETF is not liable for any cost incurred by any vendor who responds to this RFI.
7. ETF reserves the right to ask for clarification of any responses.

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Department of Employee Trust Funds

P.O. Box 7931

Madison, WI 53707-7931

# RFI ETI0002 Vendor Response Form

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| **A** | **Legal name and address of your company** |  |  |
| **Name, telephone number, and email address of the person submitting this response** |  |  |
| **Company website** |  |  |

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| **B** | Does your company provide professional services to manage address information and locate persons for the purpose of paying them benefits? Please describe the services your company offers. |
| Answer: |

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| **C** | **If so, what is the cost model? I.E. Hourly rate, cost per type of record found, or other.** |
| Answer: |

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| --- | --- |
| **D** | **Please provide a list of companies and/or government agencies to whom your company provides the service of locating people for the purpose of paying them benefits and/or managing address information. Please include the cost model for those service contracts. Please attach those specific contracts and/or your model contract(s) for these types of service.** |
| Company/agency:  Contact name:  Contact’s phone and e-mail:  Cost model:  Type of service provided: |

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| **E** | **Does your company make direct contact with the people you are searching for? If so, how – phone, email, in-person?** |
| Answer: |

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| **F** | **If your company makes direct contact with the people you are searching for, how do you establish rapport so that people understand the contact is legitimate and to their benefit?** |
| Answer: |

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| **G** | **Please attach a sample invoice for the service of locating beneficiaries and/or managing address information.** |
| Answer: |

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| **H** | **Please provide any additional relevant information.** |
| Answer: |