**Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions:**

* This form shall be completed by the Vendor by marking the check boxes shown below. By marking these boxes the Vendor acknowledges compliance with these items. Not checking a box may be cause for rejection of Vendor’s Proposal.
* Print the name of the Vendor above.
* Complete the signature block below: a) print the name of the Vendor; b) print the name of the representative authorized to legally bind the Vendor who will sign this form; c) provide the signature of said representative; d) include the date on which this form is signed.
* Return this completed form with Vendor’s Proposal.

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| Exhibit 1: Pro Forma Contract | Have read, completed, and signed. |
| Exhibit 2: Standard Terms and Conditions (DOA-3054) | Have read and understand. |
| Exhibit 3: Supplemental Standard Terms and Conditions for Procurement for Services (DOA-3681) | Have read and understand. |
| Exhibit 4: Contract Terms and Conditions | Have read and understand. |
| Attachment A: Proposer Checklist | Have read, completed, and signed. |
| Attachment B: Mandatory Vendor Qualifications | Have complied with all requirements. |
| Attachment C: Cost Proposal | Have read, completed, and signed. |
| Attachment D: Financial Compliance | Have read, completed, and signed. |
| Attachment E: Subcontractor Information | Have read, completed, and signed. |
| Attachment F: Designation of Confidential and Proprietary Information (DOA-3027) | Have read, completed, and signed. |
| Attachment G: Request for Proposal (DOA-3261) | Have read, completed, and signed. |
| Attachment H: Vendor Information (DOA-3477) | Have read, completed, and signed. |

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| Attachment I: Vendor References (DOA-3478) | Have read, completed, and signed. |
| Current W-9 (use IRS Form) | Have read, completed, and signed. |
| Appendix 1: State of Wisconsin Enrollment Data | Have read and understand. |
| Appendix 2: GHIP-WPE Employer Group Detail | Have read and understand. |
| Appendix 3: Department of Corrections (DOC) Work Locations | Have read and understand. |
| Appendix 4: State Work Locations (non-DOC) | Have read and understand. |
| Appendix 5: 834 Companion Guide | Have read and understand. |
| Appendix 6: Reporting Requirements | Have read and understand. |
| Appendix 7: Performance Standards | Have read and understand. |
| RFP Section 2: Preparing and Submitting a Proposal | Have complied with all requirements. |
| RFP Section 3: Proposal Selection and Award Process | Have read and understand. |
| RFP Section 6: General Questionnaire | Have complied with all requirements. |
| RFP Section 7: Third Party Administrative Services Questionnaire | Have complied with all requirements. |
| RFP Section 8: Cost | Have complied with all requirements. |

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| Vendor Name: |  | | |
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| Printed Name of Authorized Representative | |  |  |
|  | |  |  |
|  | |  |  |
| Signature of Authorized Representative | |  | Date |