Jeremiah W. (Jay) Nixon
Governor

Catherine F. Brown
Director

Doug Nelson
Commissioner

State of Missouri
OFFICE OF ADMINISTRATION
Division of Facilities Management
Design and Construction
730 Truman Building, 301 West High Street
Post Office Box 809
Jefferson City, Missouri 65102
INTERNET: http://www.oa.mo.gov/fmdc
E-MAIL: FMDC Real Estate@oa.mo.gov

(573) 751-3339
FAX (573) 751-7277

NOTICE OF AWARD

CONTRACT NUMBER	**LEASE NUMBER**	**FACILITY ADDRESS**
JLMS0316	09601820	703 Big Bend Blvd, Manchester (St. Louis County), MO
CONTRACT TITLE		**CONTRACT PERIOD**
Janitorial Services – Manchester, MO		May 1, 2016 through April 30, 2017
VENDOR NUMBER 2238916400-0		**Site Information:** Number of Days per Week - 2 Number of Square Feet – 2,820 Price per Square Foot:$.0879 Monthly Amount: $247.88
VENDOR NAME AND ADDRESS MISSOURI CLEANING SERVICES INC PO BOX 222 WENTZVILLE, MO 63385 Email: mocleansvcinc@msn.com Phone: 636-357-8431		**ON-SITE CONTACT INFORMATION** Name: Gina Kroeger Phone Number: 636-2569-3951 Email: gina.kroeger@mshp.dps.mo.gov

ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:

The bid submitted by Missouri Cleaning Service dated 3/21/2016 in response to RFQ# JLMS0316 is accepted in its entirety pursuant to the terms and conditions of the RFQ.

STATE OF M ISSOURI USE ONLY

The Contractor agrees that upon receipt of a Notice of Award signed and issued by an authorized representative of the State of Missouri, a binding contract shall exist between the Contractor and the State Agency.

OA/FMDC CONTACT NAME:	**OA/FMDC CONTACT TITLE:**	**OA/FMDC CONTACT INFORMATION:**
Amber Willis	**Contract Specialist II**	**Email: Amber.willis@oa.mo.gov** **Phone: (573)526-3421 Fax(573) 751-7277**

SIGNATURE OF OA/FMDC CONTACT:	**DATE:**
Candace Willis	3/23/2016

SIGNATURE OF OA/FMDC AUTHORIZED REPRESENTATIVE:	**TITLE:**	**DATE:**
Rebecca Brinkley	Section Manager	3-23-16

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Governor

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(573) 751-3339
FAX (573) 751-7277

BID EVALUATION MEMORANDUM

Date: March 23, 2016

Bid Number: JLMS0316

Bid Title: Janitorial Services - Manchester

Date Closed: 3/22/16

Contract Specialist: Amber Willis adw

Contract's Unit Manager: Rebecca Brinkley RB

Pursuant to RFQ JLMS0316 for Janitorial Services in Manchester, an award shall be made to the lowest priced responsive bidder. Other factors that affect the determination of the lowest price responsive bidder include consideration of the Blind/Sheltered Workshop Preference and Missouri Service-Disabled Veteran Business Enterprise Preference.

Two (2) bids were received in response to RFQ JLMS0316. The bidders were:

Resource Service Solutions
Missouri Cleaning Service

No "No Bids" were received in response to RFQ JLMS0316.

No Late Bids were received in response to RFQ JLMS0316.

All bids received in response to RFQ JLMS0316 were reviewed for compliance with the evaluation criteria and preferences in the RFQ. The results of that review are as follows:

None of the bidders received preference points for Missouri Service Disabled Veteran Business Preference, or for Organizations for the Blind and Sheltered Workshop Preference.

A cost evaluation was performed in accordance with Paragraph 3.2.1 of the RFQ for janitorial Services and Supplemental Services.

The bid from Marvin Lakey has been determined to be responsive to the mandatory requirements of the RFQ, and is the lowest responsible and reliable bidder. The results of the cost evaluation were forwarded to Amy Spray of Real Estate Services Unit for review to approve an award to Missouri Cleaning Service. Real Estate Services approved the award to Missouri Cleaning Service. Therefore, I am proceeding with the award as approved.

Bid Number: JLMS0316 Bid Name: Janitorial Services - Manchester Evaluation Date: 03/22/2016

Missouri Cleaning Service		Original Contract Period		1st Renewal Period		2nd Renewal Period		3rd Renewal Period		
Line Item	Qty	Price	Extended Cost	Price	Extended Cost	Price	Extended Cost	Price	Extended Cost	
001	2,820	$0.0879	$2,974.54	$0.0879	$2,974.54	$0.0879	$2,974.54	$0.0879	$2,974.54	
002	5	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
003	5	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
004	50	$0.119	$5.95	$0.119	$5.95	$0.119	$5.95	$0.119	$5.95	
005	50	$0.15	$7.50	$0.15	$7.50	$0.15	$7.50	$0.15	$7.50	
006	1	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
007	1	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
008	250	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
009	250	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
010	250	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
011	1	$32.00	$32.00	$32.00	$32.00	$32.00	$32.00	$32.00	$32.00	
012	1	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	
013	2	$15.00	$30.00	$15.00	$30.00	$15.00	$30.00	$16.00	$32.00	
										TOTAL CONTRACT COST
		TOTAL	$3,074.99	TOTAL	$3,074.99	TOTAL	$3,074.99	TOTAL	$3,076.99	
									Grand Total Cost	**$ 12,301.94**
									Blind & Sheltered Workshop	0
									SDVE	0
									Total Cost Points	**200**

Division of Facilities Management,

Design and Construction

COST EVALUATION

Contract Specialist: Amber Willis

Bid Number: JLMS0316 Bid Name: Janitorial Services - Manchester Evaluation Date: 03/22/2016

Resource Service Solutions		Original Contract Period		1st Renewal Period		2nd Renewal Period		3rd Renewal Period		
Line Item	Qty	Price	Extended Cost	Price	Extended Cost	Price	Extended Cost	Price	Extended Cost	
001	2,820	$0.12	$4,060.80	$0.12	$4,060.80	$0.12	$4,060.80	$0.12	$4,060.80	
002	5	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
003	5	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
004	50	$0.35	$17.50	$0.35	$17.50	$0.35	$17.50	$0.35	$17.50	
005	50	$0.14	$7.00	$0.14	$7.00	$0.14	$7.00	$0.14	$7.00	
006	1	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
007	1	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	
008	250	$0.12	$30.00	$0.12	$30.00	$0.12	$30.00	$0.12	$30.00	
009	250	$0.10	$25.00	$0.10	$25.00	$0.10	$25.00	$0.10	$25.00	
010	250	$0.05	$12.50	$0.05	$12.50	$0.05	$12.50	$0.05	$12.50	
011	1	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	
012	1	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	$27.00	
013	2	$12.50	$25.00	$12.50	$25.00	$12.50	$25.00	$12.50	$25.00	
										TOTAL CONTRACT COST
		TOTAL	$4,231.80	TOTAL	$4,231.80	TOTAL	$4,231.80	TOTAL	$4,231.80	

Grand Total Cost	**$ 16,927.20**
Blind & Sheltered Workshop	0
SDVE	0
Total Cost Points	**145**

Willis, Amber

From: FMDC GENERAL
Sent: Tuesday, March 22, 2016 7:36 AM
To: Willis, Amber
Subject: FW: Received Fax From: 86363270371
Attachments: MOSRVFAXVM01_1603212324156642.TIF

-----Original Message-----
From: mosrvfaxvm@oa.mo.gov [mailto:mosrvfaxvm@oa.m.gov]
Sent: Monday, March 21, 2016 6:24 PM
To: FMDC GENERAL
Subject: Received Fax From: 86363270371

This message was received via FAXCOM, a product from Biscom Inc. http://www.biscom.com/

-------Fax Reception Report-------

Received Time:	03/21/2016 18:19
Result:	OK
Description:	All pages received OK
Result Code:	0000
Pages Received:	11
Remote TSI:	6363270371
Connect Time:	4 minutes, 27 seconds
Routing ID:	5737517277
Caller ID:	86363270371
Unique ID:	MOSRVFAXVM01_1603212324156642
Fax Line:	19
Fax Server:	MOSRVFAXVM01

The fax is included as a TIF image attachment

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number of pages including cover sheet: ____

attention to: Amber Willis date: 3-21-16

company: FM DC from: Paul Hirbe

phone #: 573-526-3421 company: Missouri Cleaning

fax #: 573-751-7277 senders phone #: 636-357-8431

comments:

By sending this fax at Office Depot, inc., the sender agrees not to use this fax to: (I) transmit material whose transmission is unlawful, harassing, libelous, abusive, threatening, harmful, vulgar, obscene, pornographic or otherwise objectionable; (II) create a false identity, or otherwise attempt to mislead others as to the identity of the sender or the origin of this fax; (III) post or transmit any material that may infringe the copyright, trade secret, or other rights of any third party; (IV) violate any federal, state or local law in the location, or (V) conduct activities related to gambling, sweepstakes, raffles, lotteries, contests, ponzi schemes or the like.

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STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION (DFMDC)
REQUEST FOR QUOTATION (RFQ)

RFQ #: JLMS0316
TITLE: Janitorial Services - Manchester
ISSUE DATE: 03/08/2016

CONTRACT SPECIALIST: Amber Willis
PHONE #: (573) 526-3421
FAX #: (573) 751-7277
E-MAIL: Amber.willis@oa.mo.gov

RETURN BID NO LATER THAN: MARCH 22, 2016 AT 2:00 PM CENTRAL TIME

MAILING INSTRUCTIONS: Print or type RFQ **Number** and **Return Due Date** on the lower left hand corner of the envelope or package.

RETURN BID TO: OFFICE OF ADMINISTRATION
DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION
301 WEST HIGH STREET, ROOM 730
PO BOX 809, JEFFERSON CITY, MO 65102

OR FAX TO: Fax #: (573) 751-7277 - FMDC – JANITORIAL BID
(Mail or Fax, please do not do both)

CONTRACT PERIOD: Effective Date of Contract through One Year

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:	STATE AGENCY'S NAME AND ADDRESS:
703 Big Bend Blvd, Manchester (St. Louis County), St. Louis, MO	Office of Administration Division of Facilities Management, Design & Construction 301 West High Street, Room 730 Jefferson City, MO 65102

The bidder hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Quotation. The bidder further agrees that the language of this RFQ shall govern in the event of a conflict with his/her bid. The bidder further agrees that upon receipt of a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the bidder and the State of Missouri.

SIGNATURE REQUIRED

DOING BUSINESS AS (DBA) NAME: Missouri Cleaning Services	LEGAL NAME OF ENTITY/INDIVIDUAL FILED WITH IRS FOR THIS TAX ID NO.:
MAILING ADDRESS: PO Box 222	IRS FORM 1099 MAILING ADDRESS: ← SAME
CITY, STATE, ZIP CODE: Wentzville, MO 63385	CITY, STATE, ZIP CODE:

CONTACT PERSON: Paul Hirbe	EMAIL ADDRESS: mocleansvcinc@msn.com
PHONE NUMBER: 636-357-8431	FAX NUMBER: —

TAXPAYER ID NUMBER (TIN)	TAXPAYER ID (TIN) TYPE (CHECK ONE)	VENDOR NUMBER (IF KNOWN)
22-3891640	X FEIN ___ SSN	22-3891640

VENDOR TAX FILING TYPE WITH IRS (CHECK ONE) (NOTE: LLC IS NOT A VALID TAX FILING TYPE.)

X Corporation ___ Individual ___ State/Local Government ___ Partnership ___ Sole Proprietor ___ Other _____

AUTHORIZED SIGNATURE: RHH	DATE:
PRINTED NAME: Paul Hirbe	TITLE: President

4. PRICING PAGE

4.1 **Janitorial Services** – The bidder shall provide a firm, fixed per square foot, per month price for the original contract period and a maximum per square foot, per month price for each potential renewal period for providing janitorial services, in accordance with the provisions and requirements specified herein. **All costs associated with providing the Janitorial Services, excluding Supplemental Services, shall be included in the stated prices.**

Line Item Number	Description c/s code: 91039	Original Contract Period Firm, Fixed Price	First Renewal Period Maximum Price	Second Renewal Period Maximum Price	Third Renewal Period Maximum Price
001	Janitorial Services	$ .0879 per square foot, per month	$ .0879 per square foot, per month	$ .0879 per square foot, per month	$ .0879 per square foot, per month

4.2 **Supplemental Service:** The bidder shall state a firm, fixed price for the original contract period and a maximum price for each potential renewal period for each of the following Supplemental Services provided in accordance with the provisions and requirements specified herein. In the event the bidder does not provide pricing on one or more of the line items below for supplemental services, it shall be interpreted and enforced as no charge ($0) to the State of Missouri. **All costs associated with providing the Supplemental Services shall be included in the stated prices.**

Line Item	Description C/S Code: 91039	**Original Contract Period Firm, Fixed Price**	**First Renewal Period Maximum Price**	**Second Renewal Period Maximum Price**	**Third Renewal Period Maximum Price**
002	Interior Window Cleaning and Other Interior Glass Surfaces	$ 0 per linear foot	$ 0 per linear foot	$ 0 per linear foot	$ 0 per linear foot
003	Exterior Window Cleaning	$ 0 per linear foot	$ 0 per linear foot	$ 0 per linear foot	$ 0 per linear foot
004	Hard Floor Cleaning - Stripping and Refinishing of Hard Flooring	$ .119 per square foot	$ .119 per square foot	$ .119 per square foot	$ .119 per square foot
005	Deep Carpet Cleaning and Water Extraction Services	$ .15 per square foot	$ .15 per square foot	$ .15 per square foot	$ .15 per square foot
006	Brushing and Spot Cleaning of Fabric Furniture	$ per piece	$ per piece	$ per piece	$ per piece
007	Cleaning and Vacuuming of Cloth Cubicle Partitions	$ 0 per partition	$ 0 per partition	$ 0 per partition	$ 0 per partition
008	One time Construction Clean-up	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot
009	Ongoing Construction Clean-up	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot
010	Final Clean-Up	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot	$ 0 per square foot
011	Additional Paper Towel Rolls	$ 32.00 per case (minimum of 6 rolls per case)	$ 32.00 per case (minimum of 6 rolls per case)	$ 32.00 per case (minimum of 6 rolls per case)	$ 32.00 per case (minimum of 6 rolls per case)
012	Additional Tri-Fold Paper Towels	$ 25.00 per case (minimum of 6 rolls per case)	$ 25.00 per case (minimum of 6 rolls per case)	$ 25.00 per case (minimum of 6 rolls per case)	$ 25.00 per case (minimum of 6 rolls per case)
013	Additional Personnel	$ 15.00 Per Hour, Per Person	$ 15.00 Per Hour, Per Person	$ 15.00 Per Hour, Per Person	$ 16.00 Per Hour, Per Person

EXHIBIT A

PARTICIPATION COMMITMENT

Organization for the Blind/Sheltered Workshop Participation Commitment – If the bidder is committing to participation by or if the bidder is a qualified organization for the blind/sheltered workshop, the bidder must provide the required information in the table below for the organization proposed and must submit the completed exhibit with the bidder's bid.

Organization for the Blind/Sheltered Workshop Commitment Table		
Name of Organization for the Blind or Sheltered Workshop Proposed	**Committed Participation** ($ amount or % of total value of contract)	**Description of Products/Services to be Provided by Listed Organization for the Blind/Sheltered Workshop**
1.		
2.		
3.		

EXHIBIT B

DOCUMENTATION OF INTENT TO PARTICIPATE

If the bidder is proposing to include the participation of an Organization for the Blind/Sheltered Workshop in the provision of the products/services required in the RFQ, the bidder must either provide a recently dated letter of intent from each organization documenting the following information, or complete and provide this Exhibit with the bidder's bid.

~ Copy This Form for Each Organization Proposed ~

Bidder Name: _____

This Section To Be Completed by Participating Organization:

By completing and signing this form, the undersigned hereby confirms the intent of the named participating organization to provide the products/services identified herein for the bidder identified above.

Indicate appropriate business classification(s):

_____ Organization for the Blind _____ Sheltered Workshop

Name of Organization _____

Contact Name: _____ Email: _____

Address: _____ Phone #: _____

City: _____ Fax #: _____

State/Zip: _____ Certification # _____

(or attach copy of certification)

Describe the products/services you *(as the participating organization)* have agreed to provide:

_____

_____

_____

_____

Document the amount of participation the bidder has committed to you (*as the participating organization*) for the products/services you are providing:

_____ % of Total Value of Contract

or

_____ Total Dollar Amount

Authorized Signature:

_____ _____

Authorized Signature of Participating Organization *Date*

EXHIBIT C

PRIOR EXPERIENCE OF BIDDER

The bidder should copy and complete this form for each reference being submitted as demonstration of the bidder's prior experience. The bidder is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Bidder Name:	Missouri Cleaning Services, Inc.
Reference Information (Current/Prior Services Performed For:)	
Name and Address of Reference Company:	Dept. of Mental Health
Reference Contact Person:	Name: _____ Phone Number: _____ Email Address: _____
Dates of Service:	4776
Dollar Value of Services	418.00
Square Footage of the Building	Total Square Feet: 4776 Square Feet of Carpeted Area: 3000 Square Feet of Hard Surface Floors: 776
Description of Prior Services Performed, Including an Indication as to Whether Carpet Cleaning was Performed and the Square Footage of the Carpeted Area	Carpet Cleaning Provided: X Yes ____ No. If yes, indicate the square footage of carpeted area: _____

As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by the State of Missouri for additional discussions regarding my/my company's association with the bidder referenced above:

_____ _____

Signature of Reference Contact Person *Date of Signature*

EXHIBIT D
MISCELLANEOUS INFORMATION

Outside United States

If any products and/or services offered under this RFQ are being manufactured or performed at sites outside the United States, the bidder MUST disclose such fact and provide details in the space below or on an attached page.

Are products and/or services being manufactured or performed at sites outside the United States?	Yes ___	No X
Describe and provide details:		

Employee Bidding/Conflict of Interest

Bidders who are employees of the State of Missouri, a member of the General Assembly or a statewide elected official must comply with Sections 105.450 to 105.458 RSMo regarding conflict of interest. If the bidder and/or any of the owners of the bidder's organization are currently an employee of the State of Missouri, a member of the General Assembly or a statewide elected official, please provide the following information.

Name of State Employee, General Assembly Member, or Statewide Elected Official:	
In what office/agency are they employed?	
Employment Title:	
Percentage of ownership interest in bidder's organization:	_____ %

EXHIBIT E

MISSOURI SERVICE-DISABLED VETERAN BUSINESS PREFERENCE

Pursuant to 34.074 RSMo, the Division of Facilities Management, Design and Construction has a goal of awarding three (3) percent of all contracts for the performance of any job or service to service-disabled veteran businesses (see below for definitions included in 34.074 RSMo) either doing business as Missouri firms, corporations, or individuals; or which maintain Missouri offices or places of business, when the quality of performance promised is equal or better and the price quoted is the same or less or whenever competing bids, in their entirety, are comparable.

Definitions:

Service-Disabled Veteran is defined as any individual who is disabled as certified by the appropriate federal agency responsible for the administration of veterans' affairs.

Service-Disabled Veteran Business is defined as a business concern:

a. Not less than fifty-one (51) percent of which is owned by one or more service-disabled veterans or, in the case of any publicly owned business, not less than fifty-one (51) percent of the stock of which is owned by one or more service-disabled veterans; and
b. The management and daily business operations of which are controlled by one or more service-disabled veterans.

If a bidder meets the definitions of a service-disabled veteran and a service-disabled veteran business as defined in 34.074 RSMo and is either doing business as a Missouri firm, corporation, or individual; or maintains a Missouri office or place of business, the bidder **must** provide the following with the bid in order to receive the Missouri service-disabled veteran business preference over a non-Missouri service-disabled veteran business when the quality of performance promised is equal or better and the price quoted is the same or less or whenever competing bids, in their entirety, are comparable:

a. A copy of a letter from the Department of Veterans Affairs (VA), or a copy of the bidder's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty) from the branch of service the bidder was in, stating that the bidder has a service-connected disability rating ranging from 0 to 100% disability; and

b. A completed copy of this exhibit

(NOTE: For ease of evaluation, please attach copy of the above-referenced letter from the VA or a copy of the bidder's discharge paper to this Exhibit.)
By signing below, I certify that I meet the definitions of a service-disabled veteran and a service-disabled veteran business as defined in 34.074 RSMo and that I am either doing business as a Missouri firm, corporation, or individual; or maintain Missouri offices or places of business at the location(s) listed below.

Veteran Information	Business Information
Service-Disabled Veteran's Name, (Please Print)	Service-Disabled Veteran Business Name
Service-Disabled Veteran's Signature	Missouri Address of Service-Disabled Veteran Business

EXHIBIT F, continued

BOX B – CURRENT BUSINESS ENTITY STATUS

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization, already on file with the State of Missouri. If completing Box B, do not complete Box C.)

I certify that Missouri Cleaning Services (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

Paul Hirbe
Authorized Business Entity Representative's Name (Please Print)

Authorized Business Entity Representative's Signature

Missouri Cleaning Services, Inc.
Business Entity Name

3-21-16
Date

mocleansvcinc@msn.com
E-Mail Address

As a business entity, the bidder/contractor must perform/provide the following. The bidder/contractor should check each to verify completion/submission:

☒ Enroll and participate in the E-Verify federal work authorization program (Website: http://www.dhs.gov/xprevprot/programs/gc_1185221678150.shtm; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein; AND

☒ Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the bidder's/contractor's name and the MOU signature page completed and signed, at minimum, by the bidder/contractor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the bidder's/contractor's name and company ID, then no additional pages of the MOU must be submitted; AND

☒ Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

EXHIBIT F, continued

BOX C – AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization, already on file with the State of Missouri. If completing Box C, do not complete Box B.)

I certify that Missouri Cleaning Services Inc. (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the bidder's/contractor's name and the MOU signature page completed and signed by the bidder/contractor and the Department of Homeland Security – Verification Division.
- ✓ A completed, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

Name of **Missouri State Agency** or **Public University*** to Which Previous E-Verify Documentation Submitted: _____

(*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University – St. Louis; Missouri Southern State University – Joplin; Missouri Western State University – St. Joseph; Northwest Missouri State University – Maryville; Southeast Missouri State University – Cape Girardeau.)

Date of Previous E-Verify Documentation Submission: _____

Previous **Bid/Contract Number** for Which Previous E-Verify Documentation Submitted:

_____ (if known)

Paul Hirbe
Authorized Business Entity Representative's Name (Please Print)

Authorized Business Entity Representative's Signature

_____
E-Verify MOU Company ID Number

mocleansvcinc@msn.com
E-Mail Address

Missouri Cleaning Services
~~Mocleansvcinc~~
Business Entity Name

3-21-16
Date

FOR STATE USE ONLY:

Documentation Verification Completed By:

_____ _____

Buyer Date