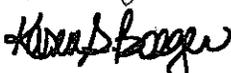




## NOTICE OF CONTRACT RENEWAL

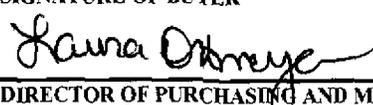
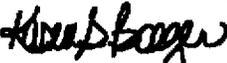
State Of Missouri  
Office Of Administration  
Division Of Purchasing  
PO Box 809  
Jefferson City, MO 65102-0809  
<http://oa.mo.gov/purchasing>

CONTRACT NUMBER C315047008	CONTRACT TITLE PREA Audit
AMENDMENT NUMBER Amendment #001	CONTRACT PERIOD February 1, 2016 through January 31, 2017
REQUISITION NUMBER NR 931 YYY16708037	VENDOR NUMBER 5199283590 0
CONTRACTOR NAME AND ADDRESS GUYER, LYNN S PO BOX 86 COTTONWOOD ID 83522-0086	STATE AGENCY'S NAME AND ADDRESS Department of Corrections Various Locations
ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:  The State of Missouri hereby exercises its option to renew the contract.  All other terms, conditions and provisions of the contract, including all prices, shall remain the same throughout the above contract period and apply hereto.  SIGNATURE OF CONTRACTOR IS NOT REQUIRED ON THIS DOCUMENT.	
BUYER Jacqueline Satterlee	BUYER CONTACT INFORMATION Email: <a href="mailto:Jacqueline.satterlee@oa.mo.gov">Jacqueline.satterlee@oa.mo.gov</a> Phone: (573) 751- 4925 Fax: (573) 526-9816
SIGNATURE OF BUYER 	DATE 1/11/16
DIRECTOR OF PURCHASING  Karen S. Boeger	



## NOTICE OF AWARD

State Of Missouri  
Office Of Administration  
Division Of Purchasing And Materials Management  
PO Box 809  
Jefferson City, MO 65102-0809  
<http://oa.mo.gov/purchasing-materials-management>

SOLICITATION NUMBER B3Z15047	CONTRACT TITLE PREA Audit
CONTRACT NUMBER C315047008	CONTRACT PERIOD February 9, 2015 through January 31, 2016
REQUISITION NUMBER NR 931 YYY14708409	VENDOR NUMBER 5199283590 0
CONTRACTOR NAME AND ADDRESS GUYER, LYNN S PO BOX 86 COTTONWOOD ID 83522-0086	STATE AGENCY'S NAME AND ADDRESS Department of Corrections Various Locations
ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:  The proposal submitted by Lynn S Guyer in response to B3Z15047 is accepted in its entirety.	
BUYER Laura Ortmeier	BUYER CONTACT INFORMATION Email: <a href="mailto:laura.ortmeier@oa.mo.gov">laura.ortmeier@oa.mo.gov</a> Phone: (573) 751-4579 Fax: (573) 526-9816
SIGNATURE OF BUYER 	DATE February 5, 2015
DIRECTOR OF PURCHASING AND MATERIALS MANAGEMENT  Karen S. Boeger	



STATE OF MISSOURI  
 OFFICE OF ADMINISTRATION  
 DIVISION OF PURCHASING AND MATERIALS MANAGEMENT (DPMM)  
 REQUEST FOR PROPOSAL (RFP)

RFP NO.: B3Z15047  
 TITLE: PREA Audit  
 ISSUE DATE: 09/10/14

REQ NO.: NR 931 YYY14708409  
 BUYER: Roy Burgess  
 PHONE NO.: (573) 751-1692  
 E-MAIL: roy.burgess@oa.mo.gov

RETURN PROPOSAL NO LATER THAN: 10/07/14 AT 2:00 PM CENTRAL TIME

MAILING INSTRUCTIONS: Print or type RFP Number and Return Due Date on the lower left hand corner of the envelope or package. Delivered sealed proposals must be in DPMM office (301 W High Street, Room 630) by the return date and time.

	(U.S. Mail)	or	(Courier Service)
RETURN PROPOSAL TO:	DPMM		DPMM
	PO BOX 809		301 WEST HIGH STREET, RM 630
	JEFFERSON CITY MO 65102-0809		JEFFERSON CITY MO 65101-1517

CONTRACT PERIOD: Effective Date of Award through One Year

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Department of Corrections

The offeror 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 Proposal (Revised 12/27/12). The offeror further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The offeror further agrees that upon receipt of an authorized purchase order from the Division of Purchasing and Materials Management or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the offeror and the State of Missouri.

SIGNATURE REQUIRED

DOING BUSINESS AS (DBA) NAME Lynn S Guyer		LEGAL NAME OF ENTITY/INDIVIDUAL FILED WITH IRS FOR THIS TAX ID NO. Lynn S Guyer	
MAILING ADDRESS P.O. Box 86		IRS FORM 1099 MAILING ADDRESS	
CITY, STATE, ZIP CODE Cottonwood, Idaho 83522		CITY, STATE, ZIP CODE	
CONTACT PERSON Lynn S Guyer		EMAIL ADDRESS lguyer@q.com	
PHONE NUMBER 208-507-1449		FAX NUMBER	
TAXPAYER ID NUMBER (TIN)	TAXPAYER ID (TIN) TYPE (CHECK ONE) <input type="checkbox"/> FEIN <input checked="" type="checkbox"/> X_SSN	VENDOR NUMBER (IF KNOWN) 51992835900	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE) <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> X Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> IRS Tax-Exempt			
AUTHORIZED SIGNATURE 		DATE 10-1-14	
PRINTED NAME Lynn S Guyer		TITLE PREA Auditor	

**EXHIBIT D**  
**BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION,**  
**AND AFFIDAVIT OF WORK AUTHORIZATION**

**BUSINESS ENTITY CERTIFICATION:**

**The offeror must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.**

- |                      |   |
|----------------------|---|
| <b><u>BOX A:</u></b> | To be completed by a non-business entity as defined below.  |
| <b><u>BOX B:</u></b> | To be completed by a business entity who has not yet completed and submitted documentation pertaining to the federal work authorization program as described at <a href="http://www.dhs.gov/files/programs/gc_1185221678150.shtm">http://www.dhs.gov/files/programs/gc_1185221678150.shtm</a> . |
| <b><u>BOX C:</u></b> | To be completed by a business entity who has current work authorization documentation on file with a Missouri state agency including Division of Purchasing and Materials Management.   |

**Business entity**, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "**business entity**" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "**business entity**" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term "**business entity**" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

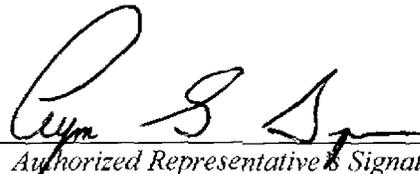
**BOX A – CURRENTLY NOT A BUSINESS ENTITY**

I certify that Lynn S. Guyer (Individual Name) **DOES NOT CURRENTLY MEET** the definition of a business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above, because: (check the applicable business status that applies below)

- I am a self-employed individual with no employees; **OR**
- The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

I certify that I am not an alien unlawfully present in the United States and if Lynn S. Guyer (Individual Name) is awarded a contract for the services requested herein under B3Z15047 (RFP Number) and if the business status changes during the life of the contract to become a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo then, prior to the performance of any services as a business entity, Lynn S. Guyer (Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the Division of Purchasing and Materials Management with all documentation required in Box B of this exhibit.

LYNN S. GUYER  
Authorized Representative's Name (Please Print)

  
Authorized Representative's Signature

\_\_\_\_\_  
Company Name (if applicable)

10-1-14  
Date

Mr. Lynn Guyer  
P.O. Box 86  
Cottonwood, Idaho 83522

RCVD OCT 6 14 AM 9:35 DA-DPMM

DPMM  
P.O. Box 809  
Jefferson City, Mo 65102-0809

SPokane WA 992  
01 OCT 2014 PM 2 L



B3 215849  
10/07/14

5510230809



TAXATION DIVISION  
P O BOX 3666  
JEFFERSON CITY MO 65105-3666



*Missouri*  
DEPARTMENT OF REVENUE

Telephone: (573) 751-9268  
Fax: (573) 522-1265  
E-mail: taxclearance@dor.mo.gov

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## VENDOR NO TAX DUE

LYNN S. GUYER  
PO BOX 86  
COTTONWODD ID 83522

DATE ISSUED: OCTOBER 14, 2014

SOCIAL SECURITY NUMBER: XXX-XX-8359

The Missouri Department of Revenue certifies that based on the information provided the above listed taxpayer/vendor and its disclosed affiliates do not sell taxable tangible personal property or provide taxable services in the State of Missouri. As a result, the above vendor and its disclosed affiliates are in compliance with Section 34.040.6, RSMo.

This statement does not limit the authority of the Director of Revenue to assess and/or collect liabilities under appeal or that become known to the Department as a result of audit or determination of successor liability.

This certificate will remain valid until such time as the business activity changes. Please note that any change in or deviation from the operation of this business as originally described will render this letter inapplicable.

DIRECTOR OF REVENUE OR DELEGATE  
STATE OF MISSOURI

BY:

A handwritten signature in cursive script that reads "Dwayne Maples".

Dwayne Maples  
Administrator, Business Tax

SL:DU0306

CBN045  
201428700300511