STATE OF MISSOURI
MISSOURI DEPARTMENT OF CORRECTIONS
CONTRACT AMENDMENT

RETURN AMENDMENT NO LATER THAN JANUARY 12, 2016 TO:
Beth Lambert, Procurement Officer II
Beth.Lambert@doc.mo.gov
(573) 526-6494 (Phone)
(573) 522-1562 (Fax)
FMU/PURCHASING SECTION
P.O. BOX 236
JEFFERSON CITY, MISSOURI 65102

DATE	VENDOR IDENTIFICATION	CONTRACT NUMBER	CONTRACT DESCRIPTION
December 15, 2015	**Caroline Foss LLC** **14535 Marmont Drive** **Chesterfield, MO 63017**	**Amendment 002** **SDA50300407**	**Indigent Sex Offender Treatment Services for Missouri Department of Corrections**

CONTRACT #SDA50300407 IS HEREBY AMENDED AS FOLLOWS:

Pursuant to paragraph 2.9.2 on page 9, the Missouri Department of Corrections desires to renew the above-referenced contract for the period of July 1, 2016 through June 30, 2017.

All terms, conditions and provisions, including prices, of the previous contract period shall remain and apply hereto.

The contractor shall complete, sign and return this document as acceptance on or before the date indicated above.

IN WITNESS THEREOF, THE PARTIES HERETO EXECUTE THIS AGREEMENT.

Company Name: Caroline Foss LLC
Mailing Address: 14535 Marmont Dr.
City, State Zip: Chesterfield, MO 63017
Telephone: 314-297-7836
E-Mail Address: carmefoss@yahoo.com
Authorized Signer's Printed Name and Title: Caroline M Foss, MSe, LPC
Authorized Signature: _____ Date: 12/30/15

THIS AMENDMENT IS ACCEPTED BY THE MISSOURI DEPARTMENT OF CORRECTIONS AS FOLLOWS: In its entirety.

Ellis McSwain, Chairman – Division of Probation and Parole 1/5/16 **Date**

STATE OF MISSOURI
MISSOURI DEPARTMENT OF CORRECTIONS
CONTRACT AMENDMENT

RETURN AMENDMENT NO LATER THAN November 16, 2015 TO:
Beth Lambert, Procurement Officer II
Beth.Lambert@doc.mo.gov
(573) 526-6494 (Phone)
(573) 522-1562 (Fax)
FMU/PURCHASING SECTION
P.O. BOX 236
JEFFERSON CITY, MISSOURI 65102

DATE	VENDOR IDENTIFICATION	CONTRACT NUMBER	CONTRACT DESCRIPTION
November 1, 2015	Caroline Foss LLC 14535 Marmont Drive Chesterfield, MO 63017	Amendment #001 SDA50300407	Indigent Sex Offender Treatment Services

CONTRACT #SDA50300407 IS HEREBY AMENDED AS FOLLOWS:

Exhibit A, page 21, to include the following location(s):

Hannibal Community Supervision Center
2002 Warren Barrett Drive
Hannibal, Missouri 63401

All other terms, conditions and provisions of the previous contract period, including prices, shall remain and apply hereto.

The contractor shall complete, sign and return this document as acceptance on or before the date indicated above.

IN WITNESS THEREOF, THE PARTIES HERETO EXECUTE THIS AGREEMENT.

Company Name: Caroline Foss LLC
Mailing Address: 14535 Marmont Drive
City, State Zip: Chesterfield, MO 63017
Telephone 314-297-7836
E-Mail Address: carriefoss@yahoo.com
Authorized Signer's Printed Name and Title: Caroline M Foss MSc, LPC
Authorized Signature: [signature] Date: 11/3/15

THIS AMENDMENT IS ACCEPTED BY THE MISSOURI DEPARTMENT OF CORRECTIONS AS FOLLOWS: In its entirety.

[signature] 11/12/15
Ellis McSwain, Chairman – Division of Probation and Parole **Date**

ORIGINAL

INVITATION FOR BID

Missouri Department of Corrections
Fiscal Management Unit
Purchasing Section
2729 Plaza Drive, P.O. Box 236
Jefferson City, MO 65102

Buyer of Record:
Gary Stoll, CPPB
Telephone: (573) 526-6402
gary.stoll@doc.mo.gov

AMENDMENT 1
IFB SDA503-004

Indigent Sex Offender Treatment Services

FOR

Missouri Department of Corrections
Statewide

Contract Period: Date of Award through June 30, 2016

Date of Issue: June 24, 2015
Page i of 42

Bids Must Be Received No Later Than:

2:00 p.m., July 9, 2015

Sealed bids must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The bidder should clearly identify the IFB number on the lower right or left-handed corner of the container in which the bid is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding contract, as defined herein, shall exist. The authorized signer of this document certifies that the contractor (named below) and each of its principals are not suspended or debarred by the federal government.

Company Name: Caroline Foss LLC
Mailing Address: 14535 Marmont Drive.
City, State, Zip: Chesterfield MO 63017
Telephone: 314-297-7836 Fax:
Federal EIN #: [redacted] State Vendor #: [redacted]
Email: carriefoss@yahoo.com

Authorized Signer's Printed Name and Title: Caroline M Foss, MSc, LLC, LPC Sexoffender provider.

Authorized Signature: Bid Date: 6/25/15.

NOTICE OF AWARD:

This bid is accepted by the Missouri Department of Corrections as follows: In its entirety.

Contract No. SDA50300407

Ellis McSwain Jr., Chairman, Board of Probation and Parole

Date 10/15/15

ORIGINAL

INVITATION FOR BID

Missouri Department of Corrections
Fiscal Management Unit
Purchasing Section
2729 Plaza Drive, P.O. Box 236
Jefferson City, MO 65102

Buyer of Record:
Gary Stoll, CPPB
Telephone: (573) 526-6402
gary.stoll@doc.mo.gov

AMENDMENT 1
IFB SDA503-004

Indigent Sex Offender Treatment Services

FOR

Missouri Department of Corrections
Statewide

Contract Period: Date of Award through June 30, 2016

Date of Issue: June 24, 2015
Page i of 42

Bids Must Be Received No Later Than:

2:00 p.m., July 9, 2015

Sealed bids must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The bidder should clearly identify the IFB number on the lower right or left-handed corner of the container in which the bid is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding contract, as defined herein, shall exist. The authorized signer of this document certifies that the contractor (named below) and each of its principals are not suspended or debarred by the federal government.

Company Name: Caroline Foss LLC
Mailing Address: 14535 Marmont Drive.
City, State, Zip: Chesterfield, MO 63017
Telephone: 314-297-7836 Fax: [redacted]
Federal EIN #: [redacted] State Vendor #: [redacted]
Email: carriefoss@yahoo.com

Authorized Signer's Printed Name and Title: Caroline M Foss, MSc, LLC, LPC Sexoffender provider.

Authorized Signature: [signature] Bid Date: 6/25/15.

NOTICE OF AWARD:

This bid is accepted by the Missouri Department of Corrections as follows:

Contract No.

Ellis McSwain Jr., Chairman, Board of Probation and Parole

Date

INVITATION FOR BID

Missouri Department of Corrections
Fiscal Management Unit
Purchasing Section
2729 Plaza Drive, P.O. Box 236
Jefferson City, MO 65102

Buyer of Record:
Gary Stoll, CPPB
Telephone: (573) 526-6402
gary.stoll@doc.mo.gov

IFB SDA503-004

Indigent Sex Offender Treatment Services

FOR

Missouri Department of Corrections
Statewide

Contract Period: Date of Award through June 30, 2016

Date of Issue: June 12, 2015
Page 1 of 42

Bids Must Be Received No Later Than:

2:00 p.m., July 9, 2015

Sealed bids must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The bidder should clearly identify the IFB number on the lower right or left-handed corner of the container in which the bid is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding contract, as defined herein, shall exist. The authorized signer of this document certifies that the contractor (named below) and each of its principals are not suspended or debarred by the federal government.

Company Name: Caroline Foss LLC
Mailing Address: 14535 Marmont Drive.
City, State, Zip: Chesterfield, MO 63017
Telephone: 314-297-7836 Fax:
Federal EIN #: [redacted] State Vendor #: [redacted]
Email: carriefoss@yahoo.com

Authorized Signer's Printed Name and Title: Caroline M Foss, MSc, LPC

Authorized Signature: Bid Date: 6/25/15

NOTICE OF AWARD:

This bid is accepted by the Missouri Department of Corrections as follows:

Contract No.

Ellis McSwain Jr., Chairman, Board of Probation and Parole Date

EXHIBIT A
SUBMISSION IS MANDATORY
SDA503-004
PRICING PAGE

The bidder must provide a firm fixed price in the table below for the original contract period and maximum prices for each potential renewal period for providing all services in accordance with the provisions and requirements of this IFB. All costs associated with providing the required services shall be included in the stated prices.

This section was revised by Amendment 1

SERVICE DESCRIPTION	*FIRM, FIXED PRICE*	*First Renewal Option*	*Second Renewal Option*	*Third Renewal Option*
DSO Evaluation	$ 400 per evaluation	$ 400 per evaluation	$ 425 per evaluation	$ 450 per evaluation
Assessment	$ 200 per assessment	$ 200 per assessment	$ 225 per assessment	$ 250 per assessment
Individual Counseling *(per 15 minute increments)*	$ 18.75 per 15 minute increments	$ 18.75 per 15 minute increments	$ 20.00 per 15 minute increments	$ 21.00 per 15 minute increments
Group Counseling *(per 15 minute increments)*	$ 5.00 per 15 minute increments	$ 5.00 per 15 minute increments	$ 5.50 per 15 minute increments	$ 6.00 per 15 minute increments

Bidder is to state the location where the service is provided:

District 12 - Farmington Community Supervision Center
1430 Doubet Road.
Farmington, MO 63640

11:30am
1:00pm
2:30pm
5:00pm
6:30pm
Groups facilitated by Ms. Foss

The bidder must state the number of days required before the services described herein could be provided:

5 days after effective date of contract award.

Terms:
The bidder should state below its discount terms offered for the prompt payment of invoices:

0 % if paid within 10 days of receipt of invoice.

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:		N/A
	In what office/agency are they employed?	
	Employment Title:	
Percentage of ownership interest in bidder's organization:		_____ %

Executive Order 04-09: Products and/or Services Provided Outside United States

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

Are any of the bidder's proposed products and/or services being manufactured or performed at sites outside the United States?	Yes ____	No ✓
If YES, do the proposed products/services satisfy the conditions described in 4a, b, c, or d of Executive Order 04-09? (see the following web link: http://www.sos.mo.gov/library/reference/orders/2004/eo04_009.asp)	Yes ____	No ____

If YES, mark the appropriate exemption below, and provide the requested details:

____ 1. Unique good or service.
- EXPLAIN:_____

____ 2. Foreign firm hired to market Missouri services/products to a foreign country.
- Identify foreign country: _____

____ 3. Economic cost factor exists
- EXPLAIN:_____

____ 4. Vendor/subcontractor maintains significant business presence in the United States and only performs trivial portion of contract work outside US.
- Identify maximum percentage of the overall value of the contract, for any contract period, attributed to the value of the products and/or services being manufactured or performed at sites outside the United States: ___%
- Specify what contract work would be performed outside the United States:

_____

Indicate if the bidder is a For Profit or Nonprofit Entity:

✓ For Profit _____ Nonprofit

By signing below, the bidder hereby declares understanding, agreement and certification of compliance to provide the services, at the prices quoted, in accordance with all the requirements and specifications contained herein and in the Terms and Conditions. The bidder further agrees that the language of this IFB shall govern in the event of a conflict with his/her bid.

Company Name Caroline Foss LLC

Printed Name Caroline M. Foss Email Address: carriefoss@yahoo.com

Authorized Signature [signature] Date 6/25/15.

EXHIBIT B
SUBMISSION IS MANDATORY

PRIOR EXPERIENCE OF BIDDER

The bidder shall copy and complete this form for each reference being submitted as demonstration of the bidder's prior experience. In addition, 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:	Caroline Foss LLC
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Missouri Board of Probation and Parole
Address of Reference Company:	2002 Warren Barrett Dr. Hannibal, MO 63401
Reference Contact Person Name:	Amy Sanders.
Contact Person Phone #	573-248-2450
Contact Person e-mail address:	amy.sanders@doc.mo.gov
Dates of Prior Services:	2012- Current
Dollar Value of Prior Services	Not Applicable
Description of Prior Services Performed	Provide Sex offender groups and individual treatment to offenders referred by Missouri Probation and Parole. Completed Sex offender assessments and evaluations on sexual offenders. Assessed risk and treatment needs.

Signature of Bidder

6/25/15
Date of Signature

EXHIBIT B
SUBMISSION IS MANDATORY

PRIOR EXPERIENCE OF BIDDER

The bidder shall copy and complete this form for each reference being submitted as demonstration of the bidder's prior experience. In addition, 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:	Cardine Foss LLC
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Missouri Board of Probation and Parole
Address of Reference Company:	1500 Vandiver, Ste. 110 Columbia, MO 65202
Reference Contact Person Name:	Kay Crockett, MSW, LCSW.
Contact Person Phone #	573-441-6382.
Contact Person e-mail address:	Kay.crockett@doc.mo.gov
Dates of Prior Services:	2013 - Ongoing
Dollar Value of Prior Services	DOC sends referrals - Clients are self-pay N/A
Description of Prior Services Performed	Provide sex offender groups and individual treatment to offenders referred by Missouri Probation and Parole Office. Completed Sex offender assessments and evaluations on sex offenders regarding risk to the community and treatment needs.

Signature of Bidder

6/25/15
Date of Signature

EXHIBIT C
SUBMISSION IS MANDATORY

PERSONNEL EXPERTISE SUMMARY
(Also Attach Resumes for Management Staff)

Personnel	Background and Expertise of Management Staff
1. Caroline M Foss (Name) Sex Offender Therapist - Resume Attached. (Title)	
2. (Name) (Title)	
3. (Name) (Title)	
4. (Name) (Title)	
5. (Name) (Title)	
6. (Name) (Title)	

Bidder's Signature

6/25/15.
Date

Serving clients in St Louis, Hannibal, and Farmington • 314-297-7836 • carriefoss@yahoo.com

Caroline Foss (Hoff)

Objective

I offer an employer excellent problem solving abilities, clinical group work experience and sound knowledge of current research in the field of forensic assessment, treatment and psychology.

Summary

- Currently employed self-employed as a Licensed Professional Counselor.
- Master of Arts degree in Professional Counseling from Lindenwood University (2009).
- Clinical Member of ATSA (Association for the Treatment of Sexual Abusers) since 2005.
- Board Member of MoATSA (Missouri Association for the Treatment of Sexual Abusers) since 2007.
- Over ten years experience facilitating group therapy for sexual offenders along with conducting sexual offender evaluations and assessments.
- Approved sexual offender treatment provider in the state of Missouri and Illinois.
- Master of Science degree in Forensic Psychology from The University of Birmingham, England (2003).
- Bachelor of Science degree in Psychology from the University of Missouri (2000).

Skills and Accomplishments

2009 Master of Arts Degree, Professional Counseling — *Lindenwood University*

Graduated 4.0 GPA

2003 Master of Science Degree, Forensic Psychology — *University of Birmingham, England*

Program emphasis in criminal thinking, research methods, statistical analysis, practicum experience in the field of forensics and training in multiple therapies for varying clients.

2014- Completed a two year Gestalt Training course with an emphasis on Individual, Group and Couples Counseling.

Professional Experience

January 2104-Current *Caroline Foss LLC* *St. Louis, MO*

Licensed Professional Counselor, LPC

Facilitation of State and Federally Approved Sexual Offender Treatment programs in Missouri to include providing discretionary sexual offender evaluations and assessments.

January 2012—
December 2013

Professional
Psychotherapy Services

Licensed Professional Counselor

- Facilitating empirically based out-patient group treatment to adult sexual offenders, both male and female.
- Conduct discretionary sexual offender evaluations and sexual offender assessments.
- Liaise with Probation and Parole officers to monitor client progress.
- Individual counseling to both forensic and non-forensic clients.

February 2004— *Provident, Inc,* *St. Louis, MO*
December 2011

Clinical and Forensic Therapist

- Facilitated out-patient group treatment to the adult offending population, namely sexual offenders.
- Developed and implemented addictions and aggressive offender group treatment programs.
- Individual psychotherapy to non-forensic clients.
- Executed Victim Impact Training to the forensic population.

November 2001— *Wilcox Psychological* *Birmingham, England*
September 2003 *Services*

Assistant Psychologist

- Administered widely used and validated psychometric assessments to the sexual offender population.
- Interpreted psychological results for written reports for the National Probation Service.
- Participated in nationally accredited sexual offender treatment programs.

- Involved extensively in research development of the treatment of Internet Sexual Offenders.

Publications and References

References available upon request. Please refer to the application.

2014- Sex Offender Treatment-A Case Study Approach to Issues and Interventions,

Wilcox, Garrett & Harkins. Co-Author of *Working with Zoosexual Offenders (Addressing High Levels of Deviance)*

2005-A Case Study of a male sex offender with zoosexual interests and behaviors

(Journal of Sexual Aggression, Volume 11 Issue 3 pg. 305).

State of Missouri

Department of Insurance, Financial Institutions and Professional Registration
Division of Professional Registration
Committee for Professional Counselors

Licensed Professional Counselor

VALID THROUGH JUNE 30, 2017
ORIGINAL CERTIFICATE/LICENSE NO. 2010028945

CAROLINE M HOFF

EXECUTIVE DIRECTOR

DIVISION DIRECTOR

N/A

EXHIBIT D (continued)

MISSOURI SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE PREFERENCE

By signing below, I certify that I meet the definitions of a service-disabled veteran and a service-disabled veteran business enterprise as defined in section 34.074, RSMo. I further certify that I meet the standards of a qualifying SDVE as listed herein pursuant to 1 CSR 40-1.050.

Service-Disabled Veteran's Name (Please Print)	Service-Disabled Veteran Business Enterprise Name
Service-Disabled Veteran's Signature	Missouri Address of Service-Disabled Veteran Business Enterprise
Phone Number	Website Address
Date	E-Mail Address

The SDVE bidder should check the appropriate statement below and, if applicable, provide the requested information.

- ☐ No, I have not previously submitted the SDV documents specified herein to the state agency or to the Office of Administration, Division of Purchasing and Materials Management (DPMM) and therefore have enclosed the SDV documents.
- ☐ Yes, I previously submitted the SDV documents specified herein within the past five (5) years to the state agency.
- ☐ Yes, I previously submitted the SDV documents specified above within the past five (5) years to the Office of Administration, Division of Purchasing and Materials Management (DPMM).

Date SDV Documents were Submitted: _____

Previous **Bid/Contract Number** for Which the SDV Documents were Submitted: _____ (if known)

(NOTE: If the SDVE and SDV are listed on the DPMM SDVE database located at http://oa.mo.gov/sites/default/files/sdvelisting.pdf , then the SDV documents have been submitted to the DPMM within the past five [5] years. However, if it has been determined that an SDVE at any time no longer meets the requirements stated above, the DPMM will remove the SDVE and associated SDV from the database.)

FOR STATE USE ONLY

SDV's Documents - Verification Completed By:

Procurement Officer	Date

EXHIBIT E
PARTICIPATION COMMITMENT

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

Organization for the Blind Sheltered Workshop Commitment Table By completing this table, the bidder commits to the use of the organization at the greater of $5,000 or 2% of the actual total dollar value of contract.	
(The services performed or the products provided by the listed Organization for the Blind/Sheltered Workshop must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)	
Name of Organization for the Blind or Sheltered Workshop Proposed	**Description of Products/Services to be Provided by Listed Organization for the Blind/Sheltered Workshop** *The bidder should also include the paragraph number(s) from the IFB which requires the product/service the organization for the blind/sheltered workshop is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.*
1.	Product/Service(s) proposed: IFB Paragraph References:
2.	Product/Service(s) proposed: IFB Paragraph References:

SDVE Participation Commitment Table		
(The services performed or the products provided by the listed SDVE must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)		
Name of Each Qualified Service-Disabled Veteran Business Enterprise (SDVE) Proposed	**Committed Percentage of Participation for Each SDVE** (% of the Actual Total Contract Value)	**Description of Products/Services to be Provided by Listed SDVE** *The bidder should also include the paragraph number(s) from the IFB which requires the product/service the SDVE is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.*
1.	%	Product/Service(s) proposed: IFB Paragraph References:
2.	%	Product/Service(s) proposed: IFB Paragraph References:
Total SDVE Percentage:	%	

EXHIBIT F

DOCUMENTATION OF INTENT TO PARTICIPATE

If the bidder is proposing to include the participation of an Organization for the Blind/Sheltered Workshop and/or qualified Service-Disabled Veteran Business Enterprise (SDVE) in the provision of the products/services required in the IFB, the bidder must either provide a recently dated letter of intent, signed and dated no earlier than the IFB issuance date, 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 _____ SDVE

Name of Organization: _____
(Name of Organization for the Blind or Sheltered Workshop or SDVE)

Contact Name: _____ Email: _____

Address (If SDVE, provide MO Address): _____ Phone #: _____

City: _____ Fax #: _____

State/Zip: _____ Certification # _____

SDVE's Website Address: _____ Certification Expiration Date: _____ (or attach copy of certification)

Service-Disabled Veteran's (SDV) Name: _____ SDV's Signature: _____
(Please Print)

PRODUCTS/SERVICES PARTICIPATING ORGANIZATION AGREED TO PROVIDE

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

_____

_____

Authorized Signature:

_____ _____

Authorized Signature of Participating Organization (Organization for the Blind, Sheltered Workshop, or SDVE) *Date (Dated no earlier than the IFB issuance date)*

EXHIBIT F (continued)

DOCUMENTATION OF INTENT TO PARTICIPATE

SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE (SDVE)

If a participating organization is an SDVE, unless the Service-Disabled Veteran's (SDV) documents were previously submitted within the past five (5) years to the state agency or to the Office of Administration, Division of Purchasing and Materials Management (DPMM), the bidder **must** provide the following SDV documents:

- a copy of the SDV's award letter from the Department of Veterans Affairs or a copy of the SDV's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty); and
- a copy of the SDV's documentation certifying disability by the appropriate federal agency responsible for the administration of veterans' affairs.

(NOTE: The SDV's award letter, the SDV's discharge paper, and the SDV's documentation certifying disability shall be considered confidential pursuant to subsection 14 of section 610.021, RSMo.)

The bidder should check the appropriate statement below and, if applicable, provide the requested information.

☐ No, I have not previously submitted the SDV documents specified above to the state agency or to the Office of Administration, Division of Purchasing and Materials Management (DPMM) and therefore have enclosed the SDV documents.

☐ Yes, I previously submitted the SDV documents specified above within the past five (5) years to the state agency.

☐ Yes, I previously submitted the SDV documents specified above within the past five (5) years to the Office of Administration, Division of Purchasing and Materials Management (DPMM).

Date SDV Documents were Submitted: _____

Previous **Bid/Contract Number** for Which the SDV Documents were Submitted: _____ (if known)

(NOTE: If the SDVE and SDV are listed on the DPMM SDVE database located at http://oa.mo.gov/sites/default/files/sdvelisting.pdf, then the SDV documents have been submitted to the DPMM within the past five [5] years. However, if it has been determined that an SDVE at any time no longer meets the requirements stated above, the DPMM will remove the SDVE and associated SDV from the database.)

FOR STATE USE ONLY	
SDV's Documents - Verification Completed By:	
_____ Procurement Officer	_____ Date

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

BUSINESS ENTITY CERTIFICATION:
The bidder/contractor must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

BOX A: To be completed by a non-business entity as defined below.
BOX 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 http://www.dhs.gov/xprevprot/programs/gc_1185221678150.shtm.
BOX C: 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 Caroline Foss LLC (Company/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 utilizes 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 Caroline Foss LLC (Company/Individual Name) is awarded a contract for the services requested herein under SDA503-004 (Bid/SFS/Contract 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, Caroline Foss LLC (Company/Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the Caroline Foss LLC (insert agency name) with all documentation required in Box B of this exhibit.

Caroline M Foss
Authorized Representative's Name (Please Print)

Authorized Representative's Signature

Caroline Foss LLC
Company Name (if applicable)

6/25/15
Date

EXHIBIT G, continued

BOX B – CURRENT BUSINESS ENTITY STATUS

N/A

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

_____	_____
Authorized Business Entity Representative's Name (Please Print)	Authorized Business Entity Representative's Signature
_____	_____
Business Entity Name	Date
_____	
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 listing the bidder's/contractor's name and company ID 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 G, continued

AFFIDAVIT OF WORK AUTHORIZATION:

The bidder/contractor who meets the section 285.525, RSMo definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now _____ (Name of Business Entity Authorized Representative) as _____ (Position/Title) first being duly sworn on my oath, affirm _____ (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that _____ (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided to the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

_____ _____
Authorized Representative's Signature Printed Name

_____ _____
Title Date

_____
E-Mail Address

Subscribed and sworn to before me this _____ (DAY) of _____ (MONTH, YEAR). I am commissioned as a notary public within the County of _____ (NAME OF COUNTY), State of _____ (NAME OF STATE), and my commission expires on _____ (DATE).

_____ _____
Signature of Notary Date

EXHIBIT G, continued

BOX C – AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS

I certify that _____ (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.

- ✓ 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 current, notarized Affidavit of Work Authorization (must be completed, signed and notarized within the last twelve months).

_____	_____
Authorized Business Entity Representative's Name (Please Print)	Authorized Business Entity Representative's Signature
_____	_____
E-Verify MOU Company ID Number	E-Mail Address
_____	_____
Business Entity Name	Date

Missouri State Agency or Public University* Name _____

Date of Submission _____

Bid/Contract Number _____

(If known)

* Public University includes the following five schools:

- 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
- Division of Purchasing & Materials Management

5 Marmont Dr.
Farfield, MO 63017

PRIORITY MAIL

TRACKED INSURED

$5.95

USPS TRACKING NUMBER

Missouri Dept. of Corrections
Purchasing Section
2729 Plaza Drive
Jefferson City, MO 65109

RECEIVED

RECEIVED
MO DEPT. OF CORRECTIONS
PURCHASING SECTION

IFB SDA503-004
No Later than 2pm July 9, 2015