

**CITY OF FREEPORT  
PUBLIC NOTICE  
REQUEST FOR PROPOSALS # 2024-02  
Group Benefit Consultant Services**

The City of Freeport is requesting proposals for Group Benefit Consultant services. The Consultant would provide cost containment strategic professional services related to overall design, selection, and ongoing administration of the City's employees benefit programs.

The intent of the RFP is to obtain professional services from a qualified firm for providing group benefit brokerage and consulting services. The scope of the work includes RFP for health insurance and other benefit coverage such as pharmacy benefit management, dental, vision, Employee Assistance Program (EAP), flexible spending, COBRA, health reimbursement account, health savings account, wellness, and benefits advocacy services. There will also be meetings with staff and public meetings with city committees or City Council, wellness groups, etc., throughout the year.

Due to the wide variety of services provided by a consulting firm, the City is not going to list a full scope of services, rather the consultant will list their proposed services.

**The deadline for submission of proposals is 10 A.M. Tuesday, February 6, 2024.** It is the responsibility of the submitting entity to ensure that the proposal is received in a timely manner. Proposals received after the deadline will not be considered for award, regardless of whether or not the delay was outside the control of the submitting firm. The City of Freeport reserves the right to negotiate with any and all persons or firms submitting timely bids.

All Proposals submitted for City consideration must include the original and four (4) copies, be clearly marked on the outside of the sealed envelope with the words "City of Freeport, Attention: City Secretary, RFP# 2024-02– Group Benefit Consultant Services and must contain the name of the company submitting the Bid.

Bids will be publicly opened and read at the Freeport City Hall located at 200 West Second Street, Freeport, Texas 77541 on Tuesday, February 6, 2024 at 10:00 a.m.

RFP documents may be downloaded from the City of Freeport's website at [freeport.tx.us/page/public-notices](http://freeport.tx.us/page/public-notices) or obtained in person at Freeport City Hall, 200 West Second Street, Freeport, Texas.

The City of Freeport is an Affirmative Action/Equal Opportunity Employer.

1<sup>st</sup> Advertisement: The Facts, Wednesday, January 24 2024

2<sup>nd</sup> Advertisement: The Facts, Wednesday, January 31, 2024

For inquiries regarding this RFP, please contact Cathy Ezell, Finance Director by phone, 979-871-0107, or email, [cezell@freeport.tx.us](mailto:cezell@freeport.tx.us) The deadline for inquiries is Friday, February 2, 2024 at 5:00 P.M.

**CITY OF FREEPORT  
REQUEST FOR PROPOSALS  
GROUP BENEFIT CONSULTANT SERVICE**

The City of Freeport is soliciting a Request for Proposals (“RFP”) for Group Benefit Consultant Services.

**I. INTRODUCTION AND PURPOSE**

The City of Freeport is requesting proposals for Group Benefit Consultant services. The Consultant would provide cost containment strategic professional services related to overall design, selection, and ongoing administration of the City’s employees benefit programs.

The City currently has approximately 122 employees eligible to enroll in group benefits. The City’s benefit plan includes medical, dental and vision plans. Plan coverage is for the period October 1 through September 30. The purpose of the Request for Proposal (RFP) is to secure the services of an independent Consultant to assist the City in the design, implementation, maintenance, and improvement of employee benefit program and improve the overall benefit and cost containment strategies of its plan(s).

**II. SCOPE OF WORK**

The intent of the RFP is to obtain professional services from a qualified firm for providing group benefit brokerage and consulting services. The scope of the work includes RFP for health insurance and other benefit coverage such as pharmacy benefit management, dental, vision, Employee Assistance Program (EAP), flexible spending, COBRA, health reimbursement account, health savings account, wellness, and benefits advocacy services. There will also be meetings with staff and public meetings with city committees or City Council, wellness groups, etc., throughout the year.

Due to the wide variety of services provided by a consulting firm, the City is not going to list a full scope of services, rather the consultant will list their proposed services.

**III. PROFESSIONAL QUALIFICATIONS**

Consultant must have a demonstrated experience with similar sized clients preferably in the public sector.

**IV. PROJECT TIMEFRAME**

The City requires a quote of the cost of 2024 health and benefit premiums by July 31, 2024 for budgeting purposes. Other consulting services include advising on the Affordable Care Act (ACA), changes in the health insurance industry, changes in the healthcare plan and negotiating directly with healthcare providers. Your responses to the enclosed listed categories will also provide direction regarding the type of information we are looking to have addressed. (See Exhibit A).

**V. PROPOSAL REQUIREMENTS**

Any Consultant wishing to submit a proposal for this RFP must submit a cover letter together with the required information to the City by the submittal deadline listed on this RFP. All information listed below must be included in the proposal and be arranged in the order shown below:

- a. Consultant’s name and contact information, brief history, and organizational structure.
- b. On no more than twelve pages, describe the Consultant’s proposed services.
- c. Identification of all key personnel that would be associated with this project. Include the responsibilities these individuals will have in this project and where their offices are located.
- d. Include a sample of an RFP response you developed for another client’s health insurance
- e. Include a list of deliverables, including various reports for health insurance, and the timeframe of when these reports would be delivered.
- f. Include a brief list of references of similar sized clients.
- g. Indicate if you have experience negotiating cost with local providers, and if so, opinion if that strategy helps save costs.
- h. Other information that you deem appropriate.

- i. Submit a Price Proposal Form listing the cost to compete the project These figures should include all expenses including time, supplies, travel (mileage, lodging, meals, etc.), photography, printing, clerical, etc. In addition, include the hourly rates to be used if additional work would be required.
- j. The Consultant must carry Errors & Omissions liability coverage indemnifying the City from negligence on the part of the Consultant when performing contacted services. Please present a copy of the policy showing per occurrence and aggregate limits.
- k. Required documents that must also be submitted include:
  - 1. Conflict of Interest Questionnaire
  - 2. Disclosure Statement
- l. Copy of license in accordance with Texas Insurance Code – Chapter 4052 Life and Health Insurance Counselors; or Chapter 4054 Life, Accident and Health Agents; or statement for exemption purposes.

**VI. SUBMITTAL REQUIREMENTS**

- a. Proposals must be clearly marked “PROPOSAL NO. 2024-02 – PROPOSAL FOR GROUP BENEFIT CONSULTANT SERVICES for the City of Freeport.” Respondent’s name and address must appear on the outside of the envelope.
- b. Respondents are required to submit three (3) original copy, one (1) electronic copy, suitable for reproduction by the City, of the proposed package no later than **10:00 a.m. (CST) on February 6, 2024**
- c. Proposals should be directed to the attention of Clarisa Molina, Interim City Secretary, and clearly labeled in a sealed package.
- d. Submit Proposal to:
 

CITY OF FREEPORT  
ATTN: CLARISA MOLINA  
CITY SECRETARY’S OFFICE  
200 WEST 2<sup>ND</sup> STREET  
FREEPORT TX 77541
- e. Respondent shall sign and date the Proposal. Proposals which are not signed and dated will be rejected. All proposals must be received at the designated location by the deadline shown. Proposals received after the deadline will not be considered for the award of the contract, and shall be considered void and unacceptable.
- f. Specifications and related documents may be obtained from the City Secretary’s Office at Freeport City Hall, 200 W 2<sup>nd</sup> Street, Freeport, Texas 77541, between the hours of 8:00 a.m., and 5:00 p.m., Monday through Friday or from the City’s website: [www.freeport.tx.us](http://www.freeport.tx.us)
- g. Pursuant to Texas Government Code 2252.908, the successful bidder must be able to provide the City of Freeport with a printed, executed, and notarized original of a completed Certificate of Interested Parties form (Form 1295) with the signed contract. Failure to do so will result in the City’s inability to execute the contract. To complete the disclosure of interested parties form, or for further information, please visit the Texas Ethics Commission’s website at <https://www.ethics.state.tx.us>. The City’s identification number (Item 3 on Form 1295) for the successful bidder to full out Texas Ethics Commission Form 1295 will be Bid No. 2024-02
- h. If additional information or clarification is necessary to assist the vendor in interpreting the information in the RFP, please contact Cathy Ezell, Finance Director at (979) 871-0107 or email: [cezell@freeport.tx.us](mailto:cezell@freeport.tx.us)

**VII. EVALUATION AND SELECTION OF PROPOSALS**

- A. The contract award will be based on the following criteria. The total possible points a proposal may receive is 100 points:
  - a. Demonstrated Competence, Experience and Qualifications (30 points)
  - b. Proposed Services (30 points)
  - c. Completion Time Schedule and other Project Commitments (10 points)

d. Price or cost (30 points)

**VIII. CONTRACT**

Following review of all qualified proposals, selection of a suitable vendor and preliminary contract negotiations, a recommendation will be made to the City Council. Upon Council approval, the City will complete contract negotiations, if required. The selected vendor should be prepared to commence work immediately following contract execution

At any time should top ranked firm be excused or contract terminated, the City reserves the right to open discussions with the next ranked firm. This agreement will have a term beginning on or about May 1, 2024 and ending on through April 30, 2025 and up to four (4) one-year extensions. The City reserves the right to terminate this agreement at any time with a thirty (30) day written notice.

**IX. TERMINATION**

Either party may terminate this Agreement at any time by giving thirty (30) days written notice to the other party of its intention to terminate as of the date specified in the notice.

**X. ASSIGNMENT**

The potential agreement with the proposer resulting from this RFP is a contract for the service of the firm and firm's interest in such agreement; duties thereunder and/or fees due thereunder may not be assigned or delegated to a third party.

**XI. GOVERNING LAW AND VENUE**

This RFP, any subsequent RFP, and resulting agreement or purchase order, shall be construed and governed by the laws of the State of Texas in a court to competent jurisdiction located in the State Courts of Brazoria County, Texas,

**XII. REVISIONS TO THE RFP**

The City reserves the right to cancel, in part or in its entirety, the RFP including but not limited to: submittal date and submittal requirements. If the City cancels or revises the RFP, all known proposers will be notified in writing by the City and any addendum to the RFP will also be posted on the City's website.

**XIII. RESERVATIONS**

The City reserves the right to waive any irregularities and to reject any or all proposals. Those submitting a proposal for this project are responsible for any and all costs associated with the preparation and submissions of a proposal in response to this RFP.

**XIV. CONFIDENTIALITY**

All proposals submitted will be deemed confidential during the evaluation process. Proposals will not be available for review by anyone other than City personnel and/or authorized agents unless otherwise directed by law, including the Public Information Act during the evaluation process. All materials submitted to the City become public property and are subject to the Texas Public Information Act. If a proposer does not desire proprietary information in the proposal to be disclosed, each page must be identified and marked proprietary at the time of the submittal. The City will to the extent allowed by law, endeavor to protect such information from disclosure. The final decision as to what information must be disclosed, however, lies with the Texas Attorney General. Failure to identify proprietary information will result in all unmarked sections being deemed non-proprietary upon public request.

**XV. PROPOSER'S CERTIFICATION**

I certify that I am authorized representative of the firm.

\_\_\_\_\_  
Firm Submitting Proposal

\_\_\_\_\_  
Address

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Authorized Signature and Title

\_\_\_\_\_  
Date

## **EXHIBIT A – Benefit Consultant Services**

(Please provide responses to the following categories)

- 1) Development of short- and long-range employee benefit plan, goals and strategies.
- 2) Perform current analysis of plan offerings, design and cost structure in an effort to identify cost containment or reduction measures to minimize potential rate increases; provide cost projections based on Fiscal and Benefit plan year.
- 3) Review and analyze claims experience, claim service, and claim administration to ensure maximum benefit to the City of Freeport.
- 4) Determine and recommend the most cost-efficient funding methods for benefit programs.
- 5) Assess current plan, educate and advise on Healthcare Reform, specifically PPACA, and the key strategic decisions for City consideration.
- 6) Prepare Health Plan Request for proposal (RFP) specifications and assist with solicitation of proposal from insurance vendors that specialize in group insurance plans for large employers.
  - a. Evaluate bids and bidders, including administration, coverage, claim payment procedures, customer service, networks, reserve establishment policies and financial solvency.
  - b. Provide City with a thorough analysis of proposed alternatives and assist with the evaluation and selection process.
- 7) Provide City with information related to local and national benefit trends and provide industry specific benchmark survey data to help design program offerings with employee and employer costs compared to similar organizations.
- 8) Meet with and provide reports and presentations to various City representatives, including City Council.
- 9) Assist with filing of all IRS tax forms, especially form 1095C
- 10) Assist with the implementation and communication of Benefit program, which may include attending and presenting information at Open Enrollment meetings when requested.
- 11) Partnerships with the Human Resources Benefits team in the administration of all group insurance plans including responding to questions from and providing information to staff, and providing other benefits-related advisory services throughout the plan year
- 12) Assist with performance management of various Benefit plan vendors.
- 13) Serve as resource and advisor on regulatory issues related to Public Employer Benefit Administration and provide general guidance on health and welfare regulatory compliance.
- 14) Recommend innovative ideas and new products, programs and services to ensure a competitive, valued and cost-effective benefits program.
- 15) Introduce proven programs and ideas to manage healthcare costs and develop wellness programs, to include recommendations and incentives to enhance current or new programs.
- 16) Describe the on-going support you would provide the City regarding plan performance.
- 17) List additional services which your firm offers which may not be previously listed.
- 18) Provide the costs to be charged by the proposer to perform the services required under this request for proposal.

**Submit Insert System for Award Management (SAM) record search for company name and company principal from <https://www.sam.gov/SAM/>**

**Example:**

The screenshot shows the SAM.gov search results page. At the top, there is a navigation bar with the SAM logo and a 'Log In' button. Below the navigation bar is a menu with options: HOME, SEARCH RECORDS, DATA ACCESS, CHECK STATUS, ABOUT, and HELP. A red alert banner states: 'ALERT: SAM.gov will be down for scheduled maintenance Saturday, 02/15/2020 from 8:00 AM to 3:00 PM'. The main heading is 'Search Results', followed by a list of instructions. Below this, the current search terms are 'City of Freeport\*'. The search results show 4 total records, with the first page displaying two results for 'FREEPORT, CITY OF'. Each result includes DUNS number, CAGE Code, and a 'View Details' button.

**Current Search Terms: City of Freeport\***

Clear Search

Total records: 4 Save PDF Export Results Print

Result Page: 1 Sort by Relevance Order by Descending

**FILTER RESULTS**

**By Record Status**

Active

Inactive

**By Record Type**

Entity Registration

Exclusion

Apply Filters

Your search for City of Freeport\* returned the following results...

Entity	FREEPORT, CITY OF	Status: Active
DUNS: 102914806	CAGE Code: 617M3	<span>View Details</span>
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 06/05/2020	Debt Subject to Offset?: No	
Purpose of Registration: Federal Assistance Awards Only		

  

Entity	FREEPORT, CITY OF	Status: Active
DUNS: 005598461	CAGE Code: 5CLE6	<span>View Details</span>
Has Active Exclusion?: No	DoDAAC:	



# CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

### OFFICE USE ONLY

Date Received

**1 Name of vendor who has a business relationship with local governmental entity.**

**2**  **Check this box if you are filing an update to a previously filed questionnaire.** (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

**3 Name of local government officer about whom the information is being disclosed.**

\_\_\_\_\_  
Name of Officer

**4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.**

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes  No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes  No

**5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.**

**6**  Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

**7**

\_\_\_\_\_  
Signature of vendor doing business with the governmental entity

\_\_\_\_\_  
Date

**CONFLICT OF INTEREST QUESTIONNAIRE**  
**For vendor doing business with local governmental entity**

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

**Local Government Code § 176.001(1-a):** "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

**Local Government Code § 176.003(a)(2)(A) and (B):**

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

\*\*\*

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

- (i) a contract between the local governmental entity and vendor has been executed;
- or
- (ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

**Local Government Code § 176.006(a) and (a-1)**

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

- (1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
- (2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
- (3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

- (A) begins discussions or negotiations to enter into a contract with the local governmental entity; or
- (B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

- (A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);
- (B) that the vendor has given one or more gifts described by Subsection (a); or
- (C) of a family relationship with a local government officer.

## Certification Regarding Lobbying

(To be submitted with each bid or offer exceeding \$100,000)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(c) The undersigned shall require that the language paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995).

The Contractor, \_\_\_\_\_, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.

\_\_\_\_\_  
Signature of Contractor's Authorized Official

\_\_\_\_\_  
Printed Name and Title of Contractor's Authorized Official

\_\_\_\_\_  
Date

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether sub awardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the sub awardee, e.g., the first sub awardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Sub awardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Bid (BID) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/bid control number assigned by the Federal agency). Included prefixes, e.g., "BID-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

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According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503

Approved by OMB  
0348-0046

### Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure)

<b>Type of Federal Action:</b> a. contract ____ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	<b>Status of Federal Action:</b> a. bid/offer/application ____ b. initial award c. post-award	<b>Report Type:</b> a. initial filing ____ b. material change
<b>Name and Address of Reporting Entity:</b> ____ Prime      ____ Sub awardee Tier____, if Known:  <b>Congressional District, if known:</b>	<b>If Reporting Entity in No. 4 is Sub awardee, Enter Name and Address of Prime:</b>  <b>Congressional District, if known:</b>	
<b>Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b>  \$	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i>	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
<b>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b>	<b>Signature:</b> _____ <b>Print Name:</b> _____ <b>Title:</b> _____ <b>Telephone No.:</b> _____ <b>Date:</b> _____	
<b>Federal Use Only</b>	<b>Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)</b>	

**CERTIFICATE OF INTERESTED PARTIES**

**FORM 1295**

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	<b>OFFICE USE ONLY</b>
<b>1 Name of business entity filing form, and the city, state and country of the business entity's place of business.</b>	
<b>2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.</b>	

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

4 <b>Name of Interested Party</b>	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country).

I declare under penalty of perjury that the foregoing is true and correct.

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)

**ADD ADDITIONAL PAGES AS NECESSARY**