

BID RESPONSE PACKET
710-25-021

PRICING

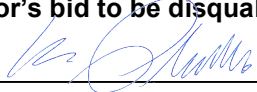
BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:	Benefit Coordinators of America, LLC D/B/A BenefitScape			
Address:	34 Main Street Floor 2			
City:	Natick	State:	MA	Zip Code: 01760
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit			
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input checked="" type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American			
AR Certification #: <u>WBE2000690</u> * See <i>Minority and Women-Owned Business Policy</i>				
PROSPECTIVE CONTRACTOR CONTACT INFORMATION				
<i>Provide contact information to be used for bid solicitation related matters.</i>				
Contact Person:	Kim Phillips	Title:	President & CEO	
Phone:	508-655-3307	Alternate Phone:		
Email:	info@benefitscape.com			
CONFIRMATION OF REDACTED COPY				
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>				
COMBINED CERTIFICATIONS FORM				
Prospective Contractor has included, in this submission packet, the signed Attachment H-Combined Certifications for Contracting with the State of Arkansas.				

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause Prospective Contractor's bid to be disqualified:

Authorized Signature:  Title: President & CEO

Printed/Typed Name: Kim Phillips Date: January 3, 2025

OFFICIAL BID PRICE SHEET

710-25-021 1095-B Processing

All costs **must** be included in the unit price. Costs not included in the unit price below are not billable under a contract established from this solicitation. Bidder must submit a printed copy of the completed official bid price sheet with bid submission.

Quantities are estimated for bidding purposes only. Quantities may increase or decrease.

Items in Table 1 are estimated *annual* quantities and the grand total reflects the yearly recurring cost for the contract's duration. The *Portal Creation* item in Table 2 is a one-time deliverable and will not recur after the first year.

Award will be made to the lowest responsible, responsive bidder based on the Annual Grand Total of Table 1. Consideration will only be given to Prospective Contractors who bid on all line items in Table 1.

TABLE 1 - Will be considered in low price determination. Please enter a Unit Price.

ITEM	DESCRIPTION	ESTIMATED ANNUAL QUANTITY	UNIT OF MEASURE	UNIT PRICE	EXTENDED AMOUNT
1	E-filing with IRS	1,681,400	Each	\$1.00	\$1,681,400.00
2	Print, Pack, and Mail	2,000	Each	\$1.50	\$3,000.00
3	Portal Maintenance (monthly fee)	12	Each	\$1,000.00	\$12,000.00
ANNUAL GRAND TOTAL					\$1,696,400.00

TABLE 2 - Not to be considered in low price determination. Please enter a Unit Price.

ITEM	DESCRIPTION	ESTIMATED QUANTITY	UNIT OF MEASURE	UNIT PRICE
1	Portal Creation	1	Each	\$0.00

AUTHORIZED SIGNATURE:

By my signature below, I certify that the I am authorized by the respondent to submit this bid on his/her behalf.

Vendor Name: Benefit Coordinators of America, LLC D/B/A BenefitScope

Date: January 3, 2025

Signature: 

Title: President & CEO

Printed Name: Kim Phillips