

DOCUMENTATION CHECKLIST

As outlined in section 2.3 Minimum Qualifications in the solicitation document, please provide the following:

- Active registration from the Arkansas Secretary of State's Office, or other state approved documentation
- Official Bid Price Sheet
- All documents provided in the Bid Response Packet
- Copy of Vendor's Equal Opportunity Policy
- Signed Addenda, if applicable
- EO 98-04 Disclosure Form (Attachment A)
- Combined Certifications (Attachment H)
- Client History Form (Attachment I)
- Mandatory Site Visit Verification Form (Attachment B)



Arkansas Secretary of State Cole Jester

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Cole Jester, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

O.J.'S SERVICE TWO, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office February 23, 1993.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 25th day of March 2025.

A handwritten signature in cursive script, reading "Cole Jester", written over a horizontal line.

Cole Jester
Secretary of State

Online Certificate Authorization Code: 7e374043deec02f

To verify the Authorization Code, visit sos.arkansas.gov

BID RESPONSE PACKET
710-25-072


BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION					
Company:	O.J.'S SERVICE TWO, INC				
Address:	P.O. Box 5549				
City:	NORTH LITTLE ROCK	State:	AR	Zip Code:	72119
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input 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 #: 5490618 * See Minority and Women-Owned Business Policy					
PROSPECTIVE CONTRACTOR CONTACT INFORMATION					
Provide contact information to be used for bid solicitation related matters.					
Contact Person:	TIFFANY FLOCK		Title:	CFO	
Phone:	501-372-2521		Alternate Phone:		
Email:	tflock@ojscleaning.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 in the 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 the Prospective Contractor's bid to be disqualified:


Authorized Signature:  Title: CFO

Printed/Typed Name: TIFFANY FLOCK Date: 4.22.25

SECTIONS 1 - 4 VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all requirements as shown in the bid solicitation.

Vendor Name:	O.J.'s Service Two, INC.	Date:	4.22.25
Signature:		Title:	CFO
Printed Name:	Tiffany Flock		

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information:

Subcontractor's Company Name	Street Address	City, State, ZIP

☒ **PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

MINIMUM QUALIFICATIONS

- In accordance with Section 2.3.B, Provide the name, address, and telephone number of the supervisor that will inspect each building at least once a week to ensure that compliance with all specifications of this solicitation are met:

Arkansas County	
Name	VANESSA JAMES
Address	301 N. BROADWAY NLR, AR 72114
Phone #	501-372-2921

Carroll County	
Name	BLAKE McFADDEN
Address	301 N. BROADWAY NLR, AR 72114
Phone #	501-372-2921

Cleburne County	
Name	KEVIN PARKER
Address	301 N. BROADWAY NLR, AR 72114
Phone #	501-372-2921



OJ's Service Two, Inc. - EEO Policy

OJ's is committed to and abides by all applicable EEO laws and regulations.

- O.J.'s Employee Handbook – 1-d. Dated March 5th, 2013

d. Equal Employment Policy

The Company complies with nondiscrimination regulations under Title VII of the Civil Rights Act of 1964, Vietnam-Era Veterans Readjustment Assistance Act of 1974, section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, the Age Discrimination in Employment Act of 1967, Uniformed Services Employment and Reemployment Act (USERRA), Executive Order 11141, the Equal Pay Act, the Arkansas Labor Code, the Tennessee Labor Code; and other applicable statutes, ordinances, and regulation. The Company complies with affirmative action regulations under Executive Order 11246, as amended, the Vietnam-Era Veterans Assistance Act, the Veterans Employment Opportunities Act of 1998 and the Jobs for Veterans Act of 2012, and the Federal Rehabilitation Act.

The Company will recruit, hire, train, and promote people in all job classifications without regard to race, color, religion, national origin, age, physical or mental disability or history of disability (except where physical or mental abilities are a bona fide occupational requirement, and the individual is not able to perform the essential functions of the position even with reasonable accommodations). Or sex (unless gender is a bona fide occupational qualification), status as a veteran, uniformed service, or other protected characteristic.

The manager and supervisors of the Company will base decisions on employment to further the principle of equal employment opportunity.

Managers and supervisors of the Company will ensure that promotions decisions are in accord with principles of equal employment opportunity by imposing only job-related requirements for promotion opportunities.

The Company will ensure that all personnel actions, including compensation, benefits, transfers, layoffs, return from layoff, company-sponsored training, education, and social and recreational programs, will be administered without regards to race, color, religion, national origin, physical or mental disability or history of disability (except where



physical or mental abilities are a bona fide occupational requirement, and the individual is not able to perform the essential functions of the position even with reasonable accommodations), or sex (unless gender is a bona fide occupational qualification), status as a veteran, uniformed service, or other protected characteristic.

The Company disapproves of sexual, racial, disability, national origin, age, veteran, uniformed service, religious, and all other forms of harassment of any employee, whether it is a by co-worker, a manager, a client, or a vendor. Sexual advances; request for sexual favors; sexual or racial jokes; racial, ethnic, national origin or disability slurs; and other harassing language or conduct have no place in the Company. In addition, physical conduct of a sexual nature will not be tolerated. It is expected that employees will treat one another with mutual respect for their dignity. Harassment of any type by any employee is grounds for immediate termination.

Any person who believes he or she may have been discriminated against in violation to these principles or who observes any discrimination in violation of these principles or who needs a reasonable accommodation should discuss that matter with their immediate supervisor. If for some reason you do not want to discuss that matter with your immediate supervisor, you may discuss the matter with the President of the Company.

Manager of supervisors who receive any complaints or concerns involving discrimination or observe any discrimination must bring the matter to the attention of the President. That individual will initiate an appropriate investigation. Employees have a responsibility to cooperate in any investigation or unlawful discrimination. All employees are to cooperate fully with the investigation and resolution of all discrimination complaints.

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 1

TO: All Addressed Vendors
FROM: Office of Procurement
DATE: March 17, 2025
SUBJECT: 710-25-058 Janitorial Services – Multiple Counties

The following change(s) to the above referenced IFB have been made as designated below:

- ☐ Change of specification(s)
☐ Additional specification(s)
☐ Change of bid opening date and time
☐ Cancellation of bid
☒ Other

OTHER

- Response Packet – remove and replace with the Revised Response Packet
- Bidders may use the following contact information for setting up appointments for site visits:

County	Contact Phone #
Arkansas	(870) 456-5086
Carroll	(870) 909-6020
Cleburne	(501) 302-6467

The specifications by virtue of this addendum become a permanent addition to the above referenced IFB. Failure to return this signed addendum may result in rejection of your proposal.

If you have any questions, please contact: Ian Cunningham
DHS.OP.Solicitations@dhs.arkansas.gov
(501) 682-0120



Vendor Signature

4.22.25

Date

O.J.'S SERVICE TWO, INC.

Company

Contract Number

Attachment Number

Action Number

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR:

☐ Yes ☒ No

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

TAXPAYER ID NAME: O.J.'s Service Two, Inc.

IS THIS FOR:

Goods? ☐ Services? ☒ Both? ☐

YOUR LAST NAME: Flood FIRST NAME: Tiffany

M.I.: F.

ADDRESS: P.O. Box 5549

CITY: North Little Rock

STATE: AK ZIP CODE: 72119

COUNTRY: U.S.A.

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	Relation
	Current	Former		From MM/YY	To MM/YY		
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☒ None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%) Position of Control
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☒ None of the above applies

Contract Number _____
Attachment Number _____
Action Number _____

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature [Signature] Title CFO Date 4.22.25

Vendor Contact Person Tiffany Flock Title CFO Phone No. 501.372.2921

Agency use only

Agency 0710 Agency

Name Department of Human Services

Agency

Contact Person

Contact

Phone No.

Contract

or Grant No.



Department of Transformation and Shared Services
Governor Sarah Huckabee Sanders
Secretary Leslie Fiskien

COMBINED CERTIFICATIONS FOR CONTRACTING WITH THE STATE OF ARKANSAS

Pursuant to Arkansas law, a vendor must certify as specified below and as designated by the applicable laws.

1. **Israel Boycott Restriction:** For contracts valued at \$1,000 or greater.

A public entity shall not contract with a person or company (the "Contractor") unless the Contractor certifies in writing that the Contractor is not currently engaged in a boycott of Israel. If at any time after signing this certification the Contractor decides to boycott Israel, the Contractor must notify the contracting public entity in writing. See Arkansas Code Annotated § 25-1-503.

2. **Illegal Immigrant Restriction:** For contracts valued at \$25,000 or greater.

No state agency may contract for services with a Contractor who knowingly employs or contracts with an illegal immigrant. The Contractor shall certify that it does not knowingly employ, or contract with, illegal immigrants. See Arkansas Code Annotated § 19-11-105.

3. **Energy, Fossil Fuel, Firearms, and Ammunition Industries Boycott Restriction:** For contracts valued at \$75,000 or greater.

A public entity shall not contract unless the contract includes a written certification that the Contractor is not currently engaged in and agrees not to engage in, a boycott of an Energy, Fossil Fuel, Firearms, or Ammunition Industry for the duration of the contract. See Arkansas Code Annotated § 25-1-1102.

4. **Scrutinized Company Restriction:** Required with bid or proposal submission.

A state agency shall not contract with a Scrutinized Company or a company that employs a Scrutinized Company as a subcontractor. A Scrutinized Company is a company owned in whole or with a majority ownership by the government of the People's Republic of China. A state agency shall require a company that submits a bid or proposal for a contract to certify that it is not a Scrutinized Company and does not employ a Scrutinized Company as a subcontractor. See Arkansas Code Annotated § 25-1-1203.

By signing this form, the Contractor agrees and certifies they are not a Scrutinized Company and they do not currently and shall not for the aggregate term of any resultant contract:

- Boycott Israel.
- Knowingly employ or contract with illegal immigrants.
- Boycott Energy, Fossil Fuel, Firearms, or Ammunition Industries.
- Employ a Scrutinized Company as a subcontractor.

Contract Number: _____ Description: _____

Agency Name: _____

Vendor Number: _____ Vendor Name: O.J.'S SERVICE TWO, INC.

77
Vendor Signature

4.22.25
Date

Attachment I
Client History Form
Janitorial Services
710-25-072

Attachment I

Janitorial Services

Instructions: This form is intended to help the State gain a more complete understanding of each Respondent's experience. This form **must** be completed completely and accurately.

The State reserves the right to verify the accuracy of these answers by contacting any of the listed clients, and all applicable clients **must** be listed. Omission of a client will constitute a failure to complete this form.

For purposes of this form, the "client" is not an individual but the entity which held the contract. By way of explanation, in the Contract resulting from this IFB, Arkansas DHS will be the client. For each listed client, Respondents may (but are not required) provide the contact information for a person at the client entity who is knowledgeable of the named project. If the State contacts clients listed on this form, the State reserves the right to contact the listed individual or another person at the listed client.

The boxes below each prompt will expand if necessary. The form **must** be signed (please see the final page) by the same signatory who signed the Response Signature Page.

1. Please list clients where you (the prime contractor only) served as the prime contractor or subcontractor for providing janitorial services for at least two (2) years. For each client, please specify the organization/agency/division. Please specify the duration of services for each. If there are no contracts which meet this definition, please state "none."

CARROLL Co DHS (14 YEARS)
CERSONNE Co DHS (6 YEARS)
ARKANSAS Co DHS (10 YEARS)

Authorized Signature: _____

Title: _____

Printed/Typed Name: _____

Date: _____

ATTACHMENT B - SITE VISIT VERIFICATION FORM

- Present this Site Visit Verification Form to the County Administrator or Designee for signature upon completion of the site visit for each location being bid.
- Submit the signed Site Visit Verification Form with the Bid Response Packet at bid submission.


This signed Site Visit Verification Form serves as verification that the Prospective Contractor or representative named below was present and participated in the site visit as required by Invitation for Bid 710-25-072 for Janitorial Services.

PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	
Representative's Printed Name:	
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	O.J.'S SERVICE TWO, INC.
Representative's Printed Name:	BLAKE MCFADDEN
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	
Representative's Printed Name:	
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	TRACI CULLING
Signature:	<i>[Signature]</i>
Date of Site Visit:	03/20/25
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	O.J.'S SERVICE TWO, INC.
Representative's Printed Name:	KEVIN PARKER
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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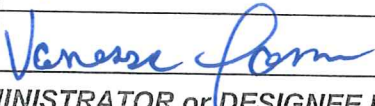
This signed Site Visit Verification Form serves as verification that the Prospective Contractor or representative named below was present and participated in the site visit as required by Invitation for Bid 710-25-058 for Janitorial Services.

PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	
Representative's Printed Name:	
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	Shannon Harris
Signature:	Shannon Harris
Date of Site Visit:	3/20/25
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	O.J.'S SERVICE TWO, INC.
Representative's Printed Name:	VANESSA JAMES
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	
Signature:	
Date of Site Visit:	

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PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION	
Company Name:	
Representative's Printed Name:	
Signature:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CAROLL CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – CLEBURNE CO.	
Printed Name:	
Signature:	
Date of Site Visit:	
COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – ARKANSAS CO.	
Printed Name:	Brenda Thompson
Signature:	Brenda Thompson
Date of Site Visit:	03/18/2015

OFFICIAL BID PRICE SHEET

710-25-072 Janitorial Services

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.

Instructions - Enter the unit price per square foot and the monthly amount for each location being bid. Pricing is not required for locations not being bid.

ITEM	DESCRIPTION	ESTIMATED QUANTITY (square feet)	UNIT PRICE (per square foot)	MONTHLY AMOUNT
1	Arkansas County	7,600	.225	1710.00
2	Carroll County	8,097	.225	1821.83
3	Cleburne County	5,321	.29	1543.09

Number of hours bidder proposes to clean per day:

5.5

AUTHORIZED SIGNATURE:

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

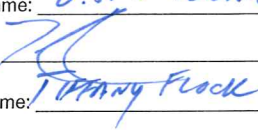
Vendor Name:

O.T.'s Service Two, INC.

Date:

4.22.25

Signature:



Title:

CFO

Printed Name:

Tammie Flock