

BID RESPONSE PACKET
710-23-0043

BID SIGNATURE PAGE

Type or Print the following information.

| PROSPECTIVE CONTRACTOR'S INFORMATION | | | | |
|--|--|--|---|-----------------|
| Company: | Mac Paper Converters, LLC | | | |
| Address: | 8370 Philips Hwy | | | |
| City: | Jacksonville | State: | FL | Zip Code: 32256 |
| Business Designation: | <input type="checkbox"/> Individual <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation | <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Nonprofit LLC | |
| Minority and Women-Owned Designation*: | <input checked="" 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 type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American | | | |
| AR Certification #: _____ * See Minority and Women-Owned Business Policy | | | | |

| PROSPECTIVE CONTRACTOR CONTACT INFORMATION | | | |
|--|---------------------------|------------------|---------------|
| Provide contact information to be used for bid solicitation related matters. | | | |
| Contact Person: | Jeff Henson | Title: | Sales Manager |
| Phone: | 904-733-9660 | Alternate Phone: | 800-334-7026 |
| Email: | Jeff.Henson@macpapers.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. |
| <p><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></p> |

| ILLEGAL IMMIGRANT CONFIRMATION |
|--|
| <p>By signing and submitting a response to this <i>Bid Solicitation</i>, a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.</p> |

| ISRAEL BOYCOTT RESTRICTION CONFIRMATION |
|--|
| <p>By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.</p> |
| <input checked="" type="checkbox"/> Prospective Contractor does not and will not boycott Israel. |

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

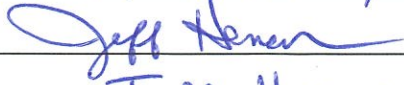
The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature: Jeff Henson Title: Sales Manager
 Printed/Typed Name: Jeff Henson Date: 2-24-23

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: | Mac Paper Conversions, LLC | Date: | 2-24-23 |
| Signature: |  | Title: | Sales Manager |
| Printed Name: | Jeff Henson | | |

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 |
|------------------------------|----------------|------------------|
| | | |
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| | | |

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

Contract Number _____
Attachment Number _____
Action Number _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

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: SUBCONTRACTOR NAME:

☐ Yes ☒ No

IS THIS FOR:

Goods? ☒ Services? ☒ Both? ☐

TAXPAYER ID NAME: Mac Paper Conversions, LLC

YOUR LAST NAME: Hansen

FIRST NAME: Jeff

M.I.: A

ADDRESS: 8370 Philips Hwy

STATE: FL

ZIP CODE: 32256

COUNTRY: US

CITY: Jacksonville

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.] | Person's Name(s) | 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? | Person's Name(s) | Ownership Interest (%) | Position of Control |
|----------------------------------|----------|--------|--|---------------|-------------|--|------------------|------------------------|---------------------|
| | Current | Former | | From MM/YY | To MM/YY | | | | |
| 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 *Jeff Henson* Title *Sales Manager* Date *2-24-23*

Vendor Contact Person *Jeff Henson* Title *Sales Manager* Phone No. *904-738-9660*

Agency use only

Agency Number 0710 Agency Name Department of Human Services Agency Contact Person _____ Contact Phone No. _____ Contract or Grant No. _____

Employee Relations Policies

Equal Employment Opportunity (EEO) Policy

Mac Papers and Packaging is committed to equal employment opportunity and seeks to create a workplace based on teamwork, mutual respect, and cooperation. Mac Papers and Packaging does not discriminate against or harass any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, genetic information or any other characteristic protected by federal, state or local laws. This policy applies to all employment actions, including but not limited to recruitment, hiring, promotion, transfer, demotion, layoff, recall, termination, compensation, and training.

Mac Papers and Packaging prohibits retaliation, including intimidation, threats or coercion, because an employee or applicant has objected to alleged discriminatory actions, engaged or may engage in filing a complaint, assisted in a review, investigation or hearing or has otherwise sought to obtain legal rights under any federal, state or local EEO law. The Company takes concerns related to equal employment and retaliation seriously. Any employee with a concern regard equal employment opportunities or retaliation should contact the VP of Human Resources.

The Company's VP of Human Resources serves as the Company's EEO official. As part of this role, she/he establishes and maintains internal auditing and reporting to effectively measure the Company's employee programs.

Religious Accommodation

Mac Papers and Packaging will reasonably accommodate the religious needs, observances, practices of our employees upon request, unless such accommodation is unreasonable, and would result in an undue hardship on the conduct of business.

In making these decisions management will consider such factors as business necessity, financial costs and expenses, security and resulting personnel problems. Accommodation requests must receive approval by Human Resources prior to response to employee.

Individuals will not be discriminated against because of their religious beliefs or practices, or because they lack religious beliefs or practices. Anyone who believes they have been discriminated against by the denial of a requested religious accommodation should contact the VP of Human Resources.

Disability Accommodation

It is our policy to treat everyone in a respectful, non-discriminatory manner. The Company is sincerely committed to equal opportunity in employment for qualified persons with disabilities and complies fully with the Americans with Disabilities Act (ADA) as well as state and local law. Consistent with our policy of nondiscrimination, the Company will work with qualified employees and applicants to identify and provide reasonable accommodations so that the individual can perform the essential functions of the job with or without reasonable accommodations, when doing so is not an undue hardship on the Company.

An employee with a disability may request a reasonable accommodation to perform the essential functions of their job by contacting the Human Resources Department. We encourage individuals with disabilities to engage with Human Resources to identify reasonable accommodations.

Immigration Law Compliance

The Company is committed to employing only United States citizens and non-residents who are authorized to work in the United States and does not unlawfully discriminate based on citizenship or national origin.

In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility. Former employees who are rehired must also complete the form if they have not completed an I-9 with Mac Papers and Packaging within the past three years, or if their previous I-



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: February 7, 2023
SUBJECT: 710-23-0043 Blank Envelopes

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

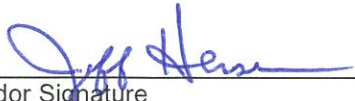
- ☒ Change of specification(s)
☐ Additional specification(s)
☐ Change of bid opening date and time
☐ Cancellation of bid
☐ Other

CHANGE OF SPECIFICATIONS

- 2.4.B remove and replace with the following:
The envelope samples provided with submission must utilize the paper stock brand indicated on the Official Bid Price Sheet. Samples must be identical to the envelopes produced if awarded the contract.
- 2.5.B.1 remove and replace with the following:
The Contractor shall use white wove, bright white paper at the weight specified above for envelopes purchased under this contract.
- 2.5.I.2 remove and replace with the following:
On a quarterly basis, quantities are estimated as follows:
9 x 12 500,000
#10 5,000

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 the Buyer at: DHS.OP.Solicitations@dhs.arkansas.gov.

Vendor Signature  Date 2-24-23
Company More Paper Conversions, LLC



Search Incorporations, Cooperatives, Banks and Insurance Companies

This is only a preliminary search and no guarantee that a name is available for initial filing until a confirmation has been received from the Secretary of State after filing has been processed. Please review our [NAME AVAILABILITY GUIDELINES HERE](#) prior to searching for a new entity name.

Printer Friendly Version

LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

[Begin New Search](#)

For service of process contact the [Secretary of State's office](#).

| | |
|-------------------|--|
| Corporation Name | MAC PAPERS, INC. |
| Fictitious Names | |
| Filing # | 811019994 |
| Filing Type | Foreign For Profit Corporation |
| Filed under Act | Dom Bus Corp; 958 of 1987 |
| Status | Withdrawn |
| Principal Address | P.O. BOX 5369 JACKSONVILLE, FL 32247 |
| Reg. Agent | CORPORATION SERVICE COMPANY |
| Agent Address | 300 SPRING BUILDING, STE. 900 LITTLE ROCK, AR 72201 |
| Date Filed | 08/10/2012 |
| Officers | JONATHAN Y. ROGERS , Incorporator/Organizer JONATHAN Y. ROGERS , Tax Preparer SUTTON MCGEHEE , President THOMAS R. MCGEHEE JR., Secretary DAVID S. MCGEHEE , Vice-President JONATHAN Y. ROGERS , Treasurer WALTER H. GORDON , Controller |
| Foreign Name | N/A |
| Foreign Address | 3300 PHILIPS HIGHWAY JACKSONVILLE, FL 32207 |
| State of Origin | FL |

[Pay Franchise Tax for this corporation](#)