



24-02-25

Glass Service and Repair District-Wide

Issue Date: 1/16/2024

Response Deadline: 2/1/2024 03:30 PM (CT)

Contact Information

Contact: Robert Rodriguez
Address: Purchasing Department
312 West 5th Street
Weslaco, TX 78599
Phone: (956) 969-6735
Email: rorodrig@wisd.us

Event Information

Number: 24-02-25
Title: Glass Service and Repair District-Wide
Type: Request for Proposal
Issue Date: 1/16/2024
Response Deadline: 2/1/2024 03:30 PM (CT)
Notes: Weslaco ISD is currently is currently accepting proposals for the above listed.

Deliver Bids to:
Weslaco ISD Superintendent's Office
319 W. 4th Street
Weslaco, Texas 78599

All Proposals will be opened on the date and time specifically listed. Proposals will be opened virtually but not read publicly through the use of a Google meeting. A link to this virtual opening will be attached to this proposal and posted on our website. Weslaco ISD is not responsible for proposals not meeting the deadline.

The awarding of the proposal will take place at a public school board meeting. The Weslaco ISD School Board reserves the right to accept, reject any and/or all proposals, waive minor technicalities, or to award the proposal to the most responsible offeror which best serves the interest of, and provides the best value to, the District.

Bid Activities

Ad. 1st run on 1/13/2024	1/13/2024
Ads are posted on the Monitor	1/13/2024
2nd ad run 1/20/2024	1/20/2024

Bid Attachments

Standard Terms & Conditions Final.doc Fill out and submit	Download
Compliance Form.docx Fill out and submit	Download
Confidential Disclosure Statement (3).docx Fill out and submit	Download
Conflict of Interest - CIQ-New-2021 (2).pdf Fill out and submit	Download
Felony Conviction Notification.docx Fill out and submit	Download
Non Collusion & Debarment Statement.docx Fill out and submit	Download

FORM 1295 CERTIFICATE OF INTERESTED PARTIES with instructions (3).pdf

[Download](#)

Fill out and submit

Signature Sheet.docx

[Download](#)

Fill out and submit

HOUSE BILL89 VERIFICATION - UNSWORN (5).pdf

[Download](#)

Fill out and submit

Ranking Criteria.docx

[Download](#)

Fill out and submit

SENATE BILL 252 CERTIFICATION - UNSWORN (6).pdf

[Download](#)

Fill out and submit

W9 Form with Instructions (4).pdf

[Download](#)

Fill out and submit

Insurance Requirements.docx

[Download](#)

Please read and acknowledge

Requested Attachments

Compliance Form

(Attachment required)

Fill out and submit

Confidential Disclosure Statement

(Attachment required)

Fill out and submit

Conflict of Interest -CIQ-New-2021

(Attachment required)

Fill out and submit

Felony Conviction Notification

(Attachment required)

Fill out and submit

Non Collusion & Debarment Statement

(Attachment required)

Fill out and submit

Signature Sheet

(Attachment required)

Fill out and submit

Form 1295 Certificate on Interested Parties with Instructions

(Attachment required)

Fill out and submit

House Bill 89 Verification (Unsworn)

(Attachment required)

Fill out and submit

Senate Bill 252 Certification (Unsworn)

(Attachment required)

Fill out and submit

W-9 Form with Instructions

(Attachment required)

Fill out and submit

Bid Attributes

1

Question

Can your company deliver to all locations district wide?

☐ Yes ☐ No

(Required: Check only one)

2

Question

If you do charge a restocking fee, enter the amount. If no restocking fee, enter 0.

\$

(Required: Numbers only)

3

Question

Is there a minimum purchase amount required for delivery?

☐ Yes ☐ No

(Required: Check only one)

4

Question

If you do have a minimum purchase amount please enter the dollar amount. If NO please enter 0.

\$

(Required: Numbers only)

5

Question

Does your company provide inter-net access to your catalog items & discounted prices?

☐ Yes

(Required: Check only one)

6

Question

Does your company maintain "on hand inventory?

☐ Yes ☐ No

(Required: Check only one)

7

Question

What would be the delivery time once a purchase order is received? ____ Number of days.

Please explain.

(Required: Maximum 4000 characters allowed)

8

Question

Can your company make an emergency delivery within one hour of receiving a purchase order?

☐ Yes ☐ No

(Required: Check only one)

9 Question

If not, what would be the average response time?

(Required: Maximum 4000 characters allowed)

10 Question

Does your company offer on-line pricing?

☐ Yes ☐ No

(Required: Check only one)

11 Question

Do you currently conduct business with Weslaco ISD?

☐ Yes ☐ No

(Required: Check only one)

12 Reference #1 Contact Information

Please provide the following information:

Reference Name:

Business Name:

Reference Email:

Reference Phone:

Provide a Brief Description of Services Provided:

(Required: Maximum 4000 characters allowed)

**1
3** **Reference # 2 Contact Information**

Please provide the following information:

Reference Name:

Business Name:

Reference Email:

Reference Phone:

Provide a Brief Description of Services Provided

(Required: Maximum 4000 characters allowed)

**1
4** **Reference # 3 Contact Information**

Please provide the following information:

Reference Name

Business Name

Reference Email

Reference Phone

Provide a Brief Description of Services Provided

(Required: Maximum 4000 characters allowed)

**1
5** **Number of personnel your company have for deliveries to district?**

(Required: Numbers only)

**1
6** **Term on Contract**

This contract will be valid starting after the school board meeting approval and expires one year from the board approval date. The district has the option to approve a second year.

☐ I have read and accepted

(Required: Check if applicable)

1
7 **Standard Terms and Conditions**

Read and acknowledge

☐ I have read and acknowledge

(Required: Check if applicable)

1
8 **Insurance Requirements**

Read and acknowledge

☐ I have read and acknowledge

(Required: Check if applicable)

1
9 **Ranking Criteria**

Read and acknowledge

☐ I have read and acknowledge

(Required: Check if applicable)

Bid Lines**1** DSB 1/8" Clear Glass 24500 0.0000 4

(Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

Item Attributes**1. If not square foot, what is the your unit of measure?**

(Required: Maximum 1000 characters allowed)

2 DSB 1/4" Clear Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

3 4' x 8' 1/8" DSB Clear Plexiglass 24125 0.0000 4*(Response required)*Quantity: 1 UOM: Sheet

Price:

\$

Total:

\$

Supplier Notes: _____
_____☐

No bid

☐Alternate specification
(Attach separate sheet)☐Additional notes
*(Attach separate sheet)***4** 4' x 8' 1/4" DSB Clear Plexiglass 24125 0.0000 4*(Response required)*Quantity: 1 UOM: Sheet

Price:

\$

Total:

\$

Supplier Notes: _____
_____☐

No bid

☐Alternate specification
(Attach separate sheet)☐Additional notes
*(Attach separate sheet)***5** 4' x 8' 1/8" DSB Obscure Plexsglass 24125 0.0000 4*(Response required)*Quantity: 1 UOM: Sheet

Price:

\$

Total:

\$

Supplier Notes: _____
_____☐

No bid

☐Alternate specification
(Attach separate sheet)☐Additional notes
*(Attach separate sheet)***6** 4' x 8' 1/4" DSB Obscure Plexiglass 24125 0.0000 4*(Response required)*Quantity: 1 UOM: Sheet

Price:

\$

Total:

\$

Supplier Notes: _____
_____☐

No bid

☐Alternate specification
(Attach separate sheet)☐Additional notes
*(Attach separate sheet)***7** 1/8" DSB Bronze Glass 24125 0.0000 4*(Response required)*Quantity: 1 UOM: square foot

Price:

\$

Total:

\$

Supplier Notes: _____
_____☐

No bid

☐Alternate specification
(Attach separate sheet)☐Additional notes
(Attach separate sheet)

8 1/4" DSB Bronze Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

9 1/8" DSB Grey Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

10 1/4" DSB Grey Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

11 1/8" DSB Clear Plate Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

12 1/4" DSB Clear Plate Glass 24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

1 1/8" Laminated Clear Glass 24125 0.0000 4

3 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/4" Laminated Clear Glass 24125 0.0000 4

4 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/8" Laminated Bronze Glass 24125 0.0000 4

5 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/4" Laminated Bronze Glass 24125 0.0000 4

6 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/8" Laminated Grey Glass 24125 0.0000 4

7 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/4" Laminated Grey Glass 24125 0.0000 4

8 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

1 1/8" Laminated Solar Cool Glass 24125 0.0000 4

9 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

2 1/4" Laminated Solar Cool Glass 24125 0.0000 4

0 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

2 1/8" Solar Cool Glass Plate 24125 0.0000 4

1 (Response required)

Quantity: 1 UOM: square foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

2 1/4" Solar Cool Glass Plate 24125 0.0000 4

2 (Response required)

Quantity: 1 UOM: sq Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
☐ Alternate specification
(Attach separate sheet)
☐ Additional notes
(Attach separate sheet)

2 1/8" x 4' x 8' Lexan Plastic Glass 24125 0.0000 4

3 (Response required)

Quantity: 1 UOM: Sheet

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

2 1/4" x 4' x 8' Lexan Plastic Glass 24125 0.0000 4

4 (Response required)

Quantity: 1 UOM: Sheet

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

2 1/8" Wire Glass 24125 0.0000 4

5 (Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

2 1/4" Wire Glass 24125 0.0000 4

6 (Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

2 48" x 100" Glass Mirror

7 (Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

28

15" x 36" Glass Mirror

(Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

29

88R Summac Silicone 10 oz. tube

(Response required)

Quantity: 1 UOM: Box

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

Item Attributes**2. How Many Units per Box**

(Required: Maximum 1000 characters allowed)

30

Mastic Mirror

(Response required)

Quantity: 1 UOM: Gallon

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

31

Mastic Mirror: 10 oz tube

(Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Glazing Bead 12 foot strip

2 (Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Glazing Bead 24 foot strip

3 (Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Top Header Aluminum Track

4 (Response required)

Quantity: 1 UOM: Linear Foot

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Bottom Aluminum Track

5 (Response required)

Quantity: 1 UOM: Linear Foot

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 H-Bar Strips, (for showcase)

6 (Response required)

Quantity: 1 UOM: Linear Foot

Price: \$

Total: \$

Supplier Notes:

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 J-Bar Strips, Silver 5/8" 24125 0.0000 4

7 (Response required)

Quantity: 1 UOM: Linar Foot Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Plastic Clips for 1/4" mirrors 24125 0.0000 4

8 (Response required)

Quantity: 1 UOM: Each Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

3 Dallas Clips for 1"4 mirrors 24125 0.0000 4

9 (Response required)

Quantity: 1 UOM: Each Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4 **BUILDING LABOR & SERVICE**

0

Service Call

(Response required)

Quantity: 1 UOM: Each Price: \$ Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4
1 **BUILDING LABOR & SERVICE****Scaffold Setup***(Response required)*Quantity: 1 UOM: Each Price: \$ Total: \$ Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

4
2 **BUILDING LABOR & SERVICE****Labor Rate - Normal Working Hours (Removal & Installation of windows)***(Response required)*Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

4
3 **BUILDING LABOR & SERVICE****LABOR RATE - After Normal Working Hours (Removal & installation of windows)***(Response required)*Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

4
4 **BUS & AUTO GLASS****1/4" Clear Laminated Glass (DOT Approved)****24125 0.0000 4***(Response required)*Quantity: 1 UOM: square foot Price: \$ Total: \$ Supplier Notes: _____

- ☐
- No bid
-
- ☐
- Alternate specification
-
- (Attach separate sheet)
-
- ☐
- Additional notes
-
- (Attach separate sheet)

4
5**BUS & AUTO-GLASS**

1/4" Bronze Laminated Glass (DOT Approved)

24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4
6**BUS & AUTO-GLASS**

1/4" Gray Laminated Glass (DOT Approved)

24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4
7**BUS & AUTO-GLASS**

1/4" Green Laminated Glass (DOT Approved)

24125 0.0000 4

(Response required)

Quantity: 1 UOM: square foot

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4
8**BUS & AUTO-GLASS**

2018 Thomas C2 Bus Windshield

(Response required)

Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

4
9**BUS & AUTO-GLASS**

2019 Inteinalional Bus Windshield

*(Response required)*Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
0**BUS & AUTO-GLASS**

2021 International Bus Windshield

*(Response required)*Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
1**BUS & AUTO-GLASS**

2015 Suburban Windshield

*(Response required)*Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
2**BUS & AUTO-GLASS**

2018 Suburban Windshield

*(Response required)*Quantity: 1 UOM: Each

Price: \$

Total: \$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
3**BUS & AUTO-GLASS**

2019 Suburban Windshield

(Response required)

Quantity: 1 UOM: Each

Price:

\$

Total:

\$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
4**BUS & AUTO-GLASS**

2018 F-150 Windshield

(Response required)

Quantity: 1 UOM: Each

Price:

\$

Total:

\$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
5**BUS & AUTO-GLASS**

2019 1500 Chevy Silverado Windshield

(Response required)

Quantity: 1 UOM: Each

Price:

\$

Total:

\$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
6**BUS & AUTO-GLASS****Service call**

(Response required)

Quantity: 1 UOM: Each

Price:

\$

Total:

\$

Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
7**BUS & AUTO-GLASS****Labor Rate - Buses:** Normal Working Hours (Removal and Installation of Windows.)

(Response required)

Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
8**BUS & AUTO -GLASS****Labor Rate-Buses:** After normal working hours: (Removal & Installation of windows)

(Response required)

Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

5
9**BUS & AUTO-GLASS****Labor Rate - Autos:** Normal working hours (Removal & Installation of Windows)

(Response required)

Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

6
0**BUS & AUTO-GLASS****Labor Rate-Autos:** After normal working hours (Removal & Installation of windows.)

(Response required)

Quantity: 1 UOM: Hourly Price: \$ Total: \$ Supplier Notes: _____

- ☐ No bid
- ☐ Alternate specification
(Attach separate sheet)
- ☐ Additional notes
(Attach separate sheet)

Supplier Information

Company Name:

Contact Name:

Address:

Phone:

Fax:

Email:

Supplier Notes

By submitting your response, you certify that you are authorized to represent and bind your company.

Print Name

Signature

WESLACO INDEPENDENT SCHOOL DISTRICT

STANDARD TERMS AND CONDITIONS

ITEMS BELOW APPLY TO AND BECOME A PART OF TERMS AND CONDITIONS OF THIS PROPOSAL UNLESS SUPERSEDED BY ANY ATTACHED TERMS AND SUPPLEMENTAL CONDITIONS OR SPECIFICATIONS IN WHICH CASE ATTACHED CONDITIONS WILL PREVAIL. **ANY EXCEPTIONS MUST BE IN WRITING.**

1. Proposals should be submitted electronically through ION Wave **OR** by submitting a hard copy of your bid package.

If submitting a hard copy proposal, it shall be placed in a separate envelope, sealed and properly identified with the proposal title and proposal number. Responses sent by overnight mail should have proposal # written on delivery ticket.
2. Proposal packages being delivered must be received in the Weslaco ISD Superintendent's Office before the hour and date specified.
3. Late proposals will not be considered under any circumstances and will be mailed back unopened.
4. Proposals must have original signatures. Faxed or email responses will not be considered.
Failure to manually sign proposal will disqualify it. Persons signing proposal should show title or authority to bind their firm to a contract.
5. **Unit Price & Extended Cost:** The unit cost entered and the extended cost provided is solely the responsibility of the vendor submitting this proposal. Offer unit price on quantity and if specified extend and show the total. In case of error in extension, the item in question will not be included as part of your proposal. Weslaco ISD will not enter or correct extended costs.
6. Proposal prices must be firm for acceptance for **ninety (90) days** from proposal opening date. No proposals may be withdrawn without written approval after a contract has been signed, or partial performance of the proposal agreement has begun.
7. Proposal prices should be **F.O.B. Weslaco ISD, WESLACO, TEXAS**, Freight Prepaid (inside delivery).
8. The district is exempt from Excise and Sales Tax: Federal, State and Local. Do not include tax in proposal. If it is determined that tax was included in the proposal, it will not be included in the tabulation or any awards. Tax exemption certificates will be furnished upon request.

9. **Any catalog, brand name or manufacturer's reference used in the proposal request is descriptive - not restrictive - it is intended to indicate type and quality desired.**
Proposals on brands of like nature and quality will be considered. If proposing on other than reference specifications, proposal must include manufacturer, brand, model, etc. of article offered. If brand other than that specified is offered, complete descriptive information of said article must be included with the proposal. If offeror takes no exception to specifications of reference data, brand names, models, etc., items must be furnished as specified.
10. All items offered should be designated "**as specified**" or "**equal**".
11. On items designated "**equal**", samples must be furnished within five (5) working days after proposal opening at no cost to the district, if requested. If not destroyed in examination they will be returned to the offeror upon request, at their expense.
12. **All items offered must be new**, in first class condition, including containers suitable for shipment and storage, unless otherwise indicated on the proposal. Failure to submit requested samples (if any) may be terms for not considering the proposed item.
13. The District reserves the right to accept or reject all or any part of any proposal, waive minor technicalities and award the proposal to best serve the interest of the District.
14. The District reserves the right to purchase additional quantities, not to exceed 100 % of quantities listed, throughout the proposal period as listed on this proposal subject to verification of the same or lower prices and same conditions of this proposal. All purchases will be made contingent on the availability of funds.
15. **No Proposal:** All proposal forms should be signed as needed, and returned even if offeror is unable to submit a proposal at this time, but wishes to remain on offerors' list.
16. **Payment Terms:** Payment for items acquired under this proposal will be paid "net, 30 days," after satisfactory receipt of goods ordered, or receipt of invoice, whichever occurs later.
17. **Substitutions:** Substitutions from the brand (s) offered on proposal will not be accepted, after Board approval of the proposals unless approved in writing by the Chief Financial Officer or his designee. Samples of possible substitution items may be requested at any period.
18. **Cash Refunds:** Cash refunds should **not** be given to **any** individuals for returned items acquired through a purchase order. If cash refunds are necessary, they should be mailed directly to the District's Business Office.
19. **No Guaranteed Volume Quantities:** The Range of Total Estimated Expenditures is based approximately on a twelve (12) month period. No quantity volume is guaranteed.
20. **Order:** Weslaco ISD will order from the successful vendor by purchase orders as the supplies are needed and based on the availability of funds. **Items to be purchased will be listed on the signed purchase orders.**
21. **No Purchase Order:** Any services performed and/or items shipped/delivered to District employees, schools or departments by an awarded vendor(s) without a written/signed WISD Purchase Order will not be paid by the district.

22. **Installation (if included in specifications)** - The successful proposer shall provide the following services and requirements at no additional cost above the initial proposal price on equipment or furniture. Provide transportation of the items to the building, locating the items in the proper location within the building, uncrating, complete assembly and adjustment by a trained installation mechanic and removal of all debris. Equipment is to be complete including operating/owner's manuals, wiring, and piping, and made ready for electrical and/or fluid service connection by the School District. After connections, make the machine ready, start up, analyze and correct any malfunctions of the equipment. Provide all materials equipment and labor to place machinery in top operating conditions or to fully assemble furniture.

Deliveries under terms of this proposal will be in accordance with the dates indicated therein. When date is not indicated, the vendor will enter the earliest date which can be assured. If delays are foreseen, written notice shall be given to the District. Extensions to complete orders will be considered as failure to meet delivery dates, and may result in removal of the vendor from the approved vendors list. All goods are subject to inspection and return, at the expense of the vendor, if found to be inferior to those specified.

23. **Delivery** - Deliveries shall be made during normal working hours (8am – 5pm, Monday thru Friday) unless prior approval has been obtained from the district.
24. During the performance of this contract, the contractor (vendor) agrees not to discriminate against any employee or applicant for employment because of race, color, national origin, age, religion, gender, marital or veteran status, or handicapping conditions.
25. **Venue:** Any disputes or litigation that could arise related to this proposal shall have as “Venue,” Hidalgo County in the State of Texas.
26. **Government Immunity:** Weslaco ISD does not transfer or convey its governmental immunity to any vendor.
27. **Fingerprinting:** Due to Senate Bill 9, you and any member of you company may be asked to submit fingerprinting documentation and have a criminal background check done.
28. **Awarding of Proposal:** This proposal may be awarded to one or more vendors per category listed in this proposal. Awarded vendor(s) that meet specifications may be selected for award.

WESLACO INDEPENDENT SCHOOL DISTRICT

PROPOSAL SPECIFICATIONS COMPLIANCE SHEET

TO BE FILLED IN BY OFFEROR AND SUBMITTED WITH PROPOSAL

Is this proposal in conformance with the enclosed specifications?

Yes _____ No _____

If the answer is no, offeror must identify and explain each exception taken, with reference to each page and paragraph to which the exception will apply.

It should be understood that if no exception is taken the vendor shall supply all items as specified at the time of sale. Failure to indicate any difference in products offered proposed in this proposal may be deemed sufficient grounds for rejection of a vendor's proposal.

Comments: _____

Date

Company Name

WESLACO INDEPENDENT SCHOOL DISTRICT

CONFIDENTIAL DISCLOSURE STATEMENT

For purposes of complying with the Texas Public Information Act (the "Act"), we are asking that VENDORS interested in submitting a response to a district's request for bids, proposals or qualifications statements INCLUDE A STATEMENT (THIS FORM) STATING WHETHER NONE, ALL, OR SOME OF THE INFORMATION SUBMITTED WITH THEIR RESPONSES IS CONSIDERED BY THE COMPANY AS CONFIDENTIAL BECAUSE IT MEETS ONE OR MORE OF THE EXCEPTIONS LISTED IN THE ACT.

Failure by the company(s) to fill out and sign this form, will release Weslaco ISD of any liabilities in the event Weslaco ISD releases information included in their bids, proposals or qualifications statements responses as a result of complying with a request for public records under the Act.

If the Confidential Disclosure Statement is properly filed, and Weslaco ISD receives a request for public records under the Act related to such vendor's response, Weslaco ISD will seek an opinion from the Texas Attorney General's Office as required.

This Confidential Disclosure Statement is being made by:

_____ to Weslaco ISD for the
(Vendor Name)
purpose of non-disclosure of various materials included in this package.

The rights and obligations of the parties with respect to such information are as follows:

1. "Disclosing Party" means a party that discloses Confidential Information under this Request. "Receiving Party" means a party that receives Confidential Information under this Request.
2. "Confidential Information" means information of any kind which is obtained by Receiving Party from Disclosing Party relating to this Request *and which, by appropriate marking, is identified as confidential and proprietary at the time of disclosure.*
3. Notwithstanding the foregoing, Confidential Information shall not include any information that:
 - a) is publicly available prior to the Effective Date, or becomes publicly available thereafter through no breach of this Request by the Receiving Party;
 - b) was known to the Receiving Party prior to the date of disclosure or becomes known to the Receiving Party thereafter from a third party that

has no obligation to Disclosing Party to keep such information confidential;

- c) is independently developed by the Receiving Party without the benefit of Confidential Information of the Disclosing Party, as evidenced by written records; **or**
 - d) must be produced by the Receiving Party pursuant to an order of a court of competent jurisdiction or a valid subpoena, provided that the Receiving Party promptly notifies the Disclosing Party and cooperates reasonably with the Disclosing Party's efforts to contest or limit the scope of such order.
4. The Receiving Party agrees that it will maintain the Confidential Information in confidence using a reasonable standard of care, and no less than the standard of care taken to protect its or his/her own confidential information, and will use such Confidential Information solely for the purposes of evaluating its or his/her interest in participating in a future Requests.
5. **As stated above, in the event Weslaco ISD receives a request for public records under the Act related to the vendor's response, Weslaco ISD will seek an opinion from the Texas Attorney General's Office as required.**
6. This Agreement shall not be construed as an obligation to enter into a Purchasing Agreement or any other subsequent relationship or agreement.

_____ (vendor) wishes to have the following pages protected under this agreement and not be released to a third party. The following pages are not to be disclosed unless Weslaco ISD receives authorization via an opinion from the Texas Attorney General's Office:

- ☐ NONE of the Pages in this Request for Proposals is Confidential - (RFP# 24-02-25)
- ☐ ALL Pages in this Request for Proposals are Confidential - (RFP# 24-02-25)
- ☐ ONLY Pages _____ are labeled as Confidential in this proposal - (RFP# 24-02-25)

Name of Company or Firm: _____

By: _____ Title: _____

Signature: _____ Date: _____

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.

WESLACO INDEPENDENT SCHOOL DISTRICT

FELONY CONVICTION NOTIFICATION

State of Texas Legislative Senate Bill No. 1, Section 44.034, Notification of Criminal History, Subsection (a), states "a person or business entity that enters into a contract with a school district must give advance notice to the district if the person, owner or operator of the business entity has been convicted of a felony. The notice must include a general description of the conduct resulting in the conviction of a felony."

Subsection (b) states "a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract."

THIS NOTICE IS NOT REQUIRED OF A PUBLICLY-HELD CORPORATION, BUT THE COMPANY REPRESENTATIVE MUST CHECK OFF A SELECTION BELOW (A, B, OR C)

I, the undersigned agent for the firm named below, certify that the information concerning notification of felony convictions has been reviewed by me and the following information furnished is true to the best of my knowledge.

VENDOR'S NAME: _____

AUTHORIZED COMPANY OFFICIAL'S NAME (PRINTED): _____

SIGNATURE: _____

DATE: _____

***** PLEASE CHECK OFF A SELECTION BELOW *****

() A. My firm is a publicly-held corporation, therefore, this reporting requirement is not applicable.

() B. My firm is not owned and/or operated by anyone who has been convicted of a felony.

() C. My firm is owned or operated by the following individual(s) who has/have been convicted of a felony:

Name of Felon(s): _____

Details of Conviction(s): _____

WESLACO INDEPENDENT SCHOOL DISTRICT

NON-COLLUSION & DEBARMENT STATEMENT

Non-Collusion Statement

The undersigned affirms that he/she is duly authorized to execute this contract, that this company, corporation, firm, partnership or individual has not prepared this proposal in collusion with any other Offeror, and that the contents of this proposal as to prices, terms or conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal.

Further, I affirm that I (nor any representative of my company/firm) will not discuss the contents of this proposal with any person affiliated with Weslaco ISD, other than the Chief Financial Officer or his Weslaco ISD Designee prior to the awarding of this proposal. I understand that failure to observe this procedure may cause my proposal to be rejected.

I also affirm that no officer, or stockholder of the offeror (bidder) is a member of the staff, or related to any employee of the Weslaco ISD except as noted herein _____.

Debarment Statement

By signing this page, vendor makes the assurance that vendor Is Not currently listed on government-wide exclusions in SAM, has not been debarred, suspended or otherwise excluded from conducting business with the U. S. Government according to Executive Order 12549 entitled "Debarment and Suspension."

Systems of Award Management (SAM)

I am registered with Systems of Award Management (SAM) and currently an active member.

_____ Yes, registered _____ No, not registered

Unique ID# _____

I have read all of the items on this page, understand them, and agree. I will obey and follow this attestation.

SIGNATURE

TITLE

DATE

WESLACO INDEPENDENT SCHOOL DISTRICT

PROPOSAL SIGNATURE SHEET

By signing this proposal, vendor makes assurances that all item included in this proposal have been read and understood.

I, _____,
(Print/Type Name of Company Officer or Authorized Representative)

- a) have read the general standard terms and conditions and I fully understand them, and will fully execute them if I am awarded this Proposal; and,
- b) have represented the truth concerning the Felony Conviction Notification form; and
- c) **I have checked off one of the three statements on the compliance sheet and have signed the form.**
- d) I fully understand the proposal specifications.

COMPANY NAME _____

EMPLOYER I.D. No. _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

AREA CODE/TELEPHONE: _____

EMAIL _____

Representative: _____ Title: _____

SIGNATURE

DATE

WESLACO INDEPENDENT SCHOOL DISTRICT

It is the intent of these specifications to secure proposals for:

For further information, please contact:

Baldemar Garcia Purchasing Director bgarcia@wisd.us Weslaco Independent School District 312 W. Fifth Street Weslaco, Texas 78596 (956) 969-6572 /
--

According to the Texas Education Code, Subchapter B, Section 44.031 (b), in determining to whom to award a contract, the district shall consider the following:

	Criteria	Points
1	The Purchase Price	40
2	The reputation of the vendor and of the vendor's goods or services (<i>list of references</i>)	20
3	the quality of the vendor's goods or services; (<i>list of school districts current or past you have serviced</i>)	20
4	the extent to which the goods or services meet the district's needs, (<i>does the vendor have the capacity including personnel to locate & deliver any requested item in a timely manner, and does the vendor have an on-hand inventory</i>)	20
5	the vendor's past relationship with the district;	0
6	the impact on the ability of the district to comply with the laws and rules relating to historically underutilized business;	0
7	the total long-term cost to the district to acquire the vendor's goods or services;	0
8	the vendor or the vendor's ultimate parent company or majority owner has its principal place of business in this state: (a) has its principal place of business in this state; or (b.) employs at least 500 persons in this state; and	0
9	any other relevant factor specifically stated in the request for bids or proposals	0
	Total Points	100

WESLACO INDEPENDENT SCHOOL DISTRICT

Criteria #1 - Cost – the lowest submitted cost percentage will be awarded the maximum points allowed. (40 points)

Criteria #2 – References - We are requesting up to three (3) references. Three references will qualify for the maximum points allowed (20 points).
Include: Entity name, address, contact person and telephone number

Criteria #3 – Experience/Service - We are requesting a list of school district(s) where you have provided Maintenance Supplies & Equipment within the last seven (7) years; include up to three (3) school districts to qualify for the maximum points allowed (20 points). Include: Entity name, address, contact person, telephone number and year(s).

Criteria #4 – Vendor Capacity – Provide the number of years you have been in business, number of personnel, whether you have an on hand inventory and any other information that clearly reflects your capacity to service the district (20 points)

Insurance Requirements

The vendor shall assume the full duty, obligation, and expense of obtaining and maintaining necessary insurance.

Insurance Coverage

The vendor shall be fully liable to provide and maintain in force during the life of this Contract, such insurance as General Comprehensive Liability Insurance, Comprehensive Auto Liability Insurance, and Workers' Compensations Insurance to assure to the District the protection contained in the foregoing indemnification provision undertaken by the vendor. Such policies shall be issued by companies authorized to do business in the State of Texas and having agents upon whom service of process may be made in the District and shall contain as a minimum, the following provisions, coverage, and policy limits of liability.

1. General Liability

General Liability Insurance as shall protect the District, the vendor, subcontractor, agents, and employees from claims for damages. The limits of liability provided by such policy shall be no less than **Five Hundred Thousand Dollars (\$500,000.00)** per occurrence combined single limit bodily injury and property damage, and an amount no less than **One Million Dollars (\$1,000,000.00)** for damages on account of all occurrences.

2. Auto Liability

Auto Liability Insurance with bodily injury limits of not less than **Three Hundred Thousand Dollars (\$300,000.00)** per occurrence, **Five Hundred Thousand Dollars (\$500,000)** Aggregate, and property damage limits of not less than **Three Hundred Thousand Dollars (300,000.00)** per occurrence.

3.. Workers' Compensation

Workers' Compensation and Employer's Liability Insurance with minimum limits as required by the State of Texas but in no case less than **One Hundred Thousand Dollars (\$100,000.00)**

Proof of Insurance

The vendor shall furnish to the District, if selected as an approved vendor for this proposal, a certificate of insurance naming the district as an additional insured, which specifically protects the District.

With respect to all of the above insurance, The Weslaco Independent School District shall:

- a) be named as an additional insured (Commercial General Liability and Automobile Liability only);
- b) be provided with 30 days advance notice, in writing, of cancellation or material change; and
- c) be provided with Certificates of Insurance evidencing the above required insurance.

PROOF OF CURRENT INSURANCE FOR ALL THREE (3) COVERAGE LINES REQUESTED MUST BE SUBMITTED WITH PROPOSAL, EVEN IF THE CURRENT COVERAGE LIMITS ARE NOT THE SAME AS THOSE REQUESTED. FURTHERMORE, CONTRACTOR INDICATES INTENTIONS TO PROVIDE THE REQUESTED INSURANCE COVERAGE LINES IF AWARDED THE PROPOSAL CONTRACT.

CERTIFICATE OF INTERESTED PARTIES (FORM 1295)

Weslaco Independent School District ("WISD") is required to comply with House Bill 1295, which amended the Texas Government Code by adding Section 2252.908, Disclosure of Interested Parties. Section 2252.908 prohibits WISD from entering into a contract resulting from this solicitation with a business entity unless the business entity submits a Disclosure of Interested Parties (Form 1295) to WISD at the time business entity submits the signed contract. The Texas Ethics Commission has adopted rules requiring the business entity to file Form 1295 electronically with the Texas Ethics Commission.

The Form 1295 requirement does not apply to: (1) a contract with a publicly traded business entity or wholly owned subsidiary of the same, (2) an electric utility, or (3) a gas utility.

"Interested Party" means a person:

- a) who has a controlling interest in a business entity with whom WISD contracts; or
- b) who actively participates in facilitating the contract or negotiating the terms of the contract, including a broker, intermediary, adviser, or attorney for the business entity.

"Business Entity" means an entity recognized by law through which business is conducted, including a sole proprietorship, partnership, or corporation.

"Controlling Interest" means (1) an ownership interest or participating interest in a business entity by virtue of units, percentage, shares, stock, or otherwise that exceeds 10 percent; (2) membership on the board of directors or other governing body of a business entity of which the board or other governing body is composed of not more than 10 members; or (3) service as an officer of a business entity that has four or fewer officers, or service as one of the four officers most highly compensated by a business entity that has more than four officers.

As a "business entity," all vendors must electronically complete the form on the Texas Ethics Commission's website, and then print, sign, and submit Form 1295 with their proposals even if no interested parties exist.

Proposers must file Form 1295 electronically with the Texas Ethics Commission using the online filing application, which can be found at https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm. Proposers must use the filing application on the Texas Ethics Commission's website to enter the required information on Form 1295. Proposers must print a copy of the completed form, which will include the filing date and a certification number. The printed form must be signed and dated by an authorized agent of the business entity and submitted to Weslaco ISD.

WISD must acknowledge the receipt of the filed Form 1295 by notifying the Texas Ethics Commission of the receipt of the filed Form 1295 no later than the 30th day after the date the governmental entity or state agency receives the Form 1295. After WISD acknowledges the Form 1295, the Texas Ethics Commission will post the completed Form 1295 to its website within seven business days after receiving notice from WISD.

(Sample Below)

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.

OFFICE USE ONLY

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

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 Name of Interested Party	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

HOUSE BILL89 VERIFICATION

WESLACO INDEPENDENT SCHOOL DISTRICT

I, _____ (Person name), the undersigned representative

of _____ / _____
(Company or Business name) (Company or Business address)

(hereafter referred to as company) being an adult over the age of eighteen (18) years of age, do hereby attest and verify that the company named above, under the provisions of Subtitle F, Title 10, Government Code Chapter 2270:

1. Does not boycott Israel currently; and
2. Will not boycott Israel during the term of the contract.

Pursuant to Section 2270.001, Texas Government Code:

1. *"Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and*
2. *"Company" means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.*

This is an unsworn declaration by:

Name of Company Representative (Print)

Date

SIGNATURE OF COMPANY REPRESENTATIVE

HOUSE BILL89 VERIFICATION

WESLACO INDEPENDENT SCHOOL DISTRICT

I, _____ (Person name), the undersigned representative

of _____ / _____
(Company or Business name) (Company or Business address)

(hereafter referred to as company) being an adult over the age of eighteen (18) years of age, do hereby attest and verify that the company named above, under the provisions of Subtitle F, Title 10, Government Code Chapter 2270:

1. Does not boycott Israel currently; and
2. Will not boycott Israel during the term of the contract.

Pursuant to Section 2270.001, Texas Government Code:

1. *"Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and*
2. *"Company" means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.*

This is an unsworn declaration by:

Name of Company Representative (Print)

Date

SIGNATURE OF COMPANY REPRESENTATIVE

SENATE BILL 252 CERTIFICATION

WESLACO INDEPENDENT SCHOOL DISTRICT PURCHASING DEPARTMENT

I, _____ the Undersigned, representative of

(company or business name)

located in _____,
(city) (state)

being an adult over the age of eighteen (18) years of age, pursuant to Texas Government Code, Chapter 2252, Section 2252.152 and Section 2252.153, certify that the company named above is not listed on the website of the Comptroller of the State of Texas concerning the listing of companies that are identified under Section 806.051, Section 807.051 or Section 2253.153.

I further certify that should the above-named company enter into a contract that is on said listing of companies on the website of the Comptroller of the State of Texas which do business with Iran, Sudan or any Foreign Terrorist Organization, I will immediately notify the Weslaco Independent School District Purchasing Department.

This is an unsworn declaration by:

Name of Company Representative (Print)

Date

SIGNATURE OF COMPANY REPRESENTATIVE

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here
Signature of U.S. person ►

Date ►

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

If the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.

You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.