

JACKSON COUNTY, MISSOURI
REQUEST FOR QUOTATION NO. 99
2016 PARKS + REC DEPARTMENT – FUN GUIDE BROCHURE (WITH FLAP)
PAGE ONE OF FIVE

Quotations: Quotation shall be on the Vendor’s format (letterhead or quotation form) and faxed to the Jackson County, Missouri Purchasing Department @ 816-881-3268 by **5:00pm on April 5, 2016**. Quotes received after that date will not be considered. Quotes shall include all shipping charges.

Questions: All questions must be emailed to Kyle Brack @ kbrack@jacksongov.org by 5:00pm CDT on March 29, 2016.

Evaluations: All quotations will be evaluated by Jackson County, Missouri. Jackson County, Missouri shall be the sole judge of the quotes submitted and its decision regarding award of this Request for Quotation shall be final.

Forms: The Affidavit (page 3 herein) and the Compliance Review Form (page 4 and 5 herein) shall be completed and faxed back with your quote.

SPECIFICATIONS - PARKS FUN GUIDE BROCHURE (WITH FLAP)

QUANTITY:	Bids for 50,000 and 60,000 finished pieces
PAPER TYPE:	Cover: 80lb Gloss Enamel Cover Inside: 80lb Gloss Enamel Text
PAPER COLOR:	Bright White (coated on both sides)
INK COLOR(S):	Full Color Process (4 over 4)
PRODUCT SIZE:	16 page booklet plus cover Cover: 12” wide x 10.25” tall (flat) Inside: 8” wide x 10.25” tall (flat)
LAYOUT:	Master will have a front and back side composed on 11” x 17” layouts with crops and bleeds indicated.
SIDES PRINTED:	All pages are double-sided
FOLDS:	Inside: text pieces measure eight inches in width and will fold in half to make four inch wide text pages – total of 16, four inch wide pages. Cover: piece measures 12 inches wide and will fold inward 3.875 inches from inside right to make flap. Then fold the 8.375 wide piece in half to form cover that will hold inside text pieces. After collating, two saddle stitches should be placed in spine to secure booklet.

CUTS: Trims to make finished pieces

FINISHED PRODUCT SIZE: 4" wide x 10.25" tall folded piece

SPECIAL INSTRUCTIONS: Camera ready copy (electronic upload to FTP site or on CD composed in InDesign CS5.5 program – IBM System). May contracting any or all of the following: PSD, TIFF, EPS and/or JPEG images; True Type and Postscript fonts, screens, photos, and line art. Will contract bleeds and close registration. **Will be necessary to see a pre-press proof and press proof of piece. MUST HAVE UNTION BUG PRINTED ON PIECE.**

DELIVERY: Print Job to be delivered within **10** working days after received layout for printing. Must be delivered in boxed and bundled quantities to be determined at time of bid award.

**JACKSON COUNTY, MISSOURI
COMPLIANCE REVIEW FORM**

Report Date: _____ (All reports expire annually on December 31st)

DIRECTIONS FOR COMPLETION:

Please fill out form completely. If a question refers to "past report" and this is your first one, place "1st Report" in the blank. If a question addresses an area which does not apply to your company, such as (subcontractors), place "N/A" in the blank. Please be sure this and subsequent reports are SIGNED AND DATED. If you have any questions, please call our office at (816) 881-3467.

Mail/Fax or Email reports to:

Tom Wyrsh
Contract Compliance Review Director
415 East 12th Street - 2nd Floor
Kansas City, Missouri 64106

EMAIL: cro@jacksongov.org

FAX: (816) 881-1223

1. COMPANY DESCRIPTION:

Name of Company _____

Street Address _____

City _____ State _____ Zip _____

Email Address: _____

Website Address: _____

Area Code _____ Telephone Number _____

Representative Name _____

2. COMPANY STATISTICS:

A. Total number of Employees _____

B. Total Number of Employees who are:

1. Women _____

4. Asian _____

2. Hispanic _____

5. American Indian _____

3. Black _____

6. Other _____

YES NO N/A

3. Has your company advertised for applicants since your report? _____

If so, please attach a list of publications in which ads appeared, the dates of advertising, and copies of such advertisement

4. Has there been an effort since your last report to further orientate supervisors and key personnel to the spirit and intent of the program? _____

If so, please attach a detailed report of such efforts

5. Have there been any adjustments in your job prerequisites or your recruiting and intake procedures? _____

If so, please attach a narrative of such efforts.

YES NO N/A

6. Has any effort been made since your last report in disseminating your policy to all your employees or in encouraging them to refer Minority or Female applicants?

If so, please attach a narrative of such efforts.

7. Are you attaching any other comments or concerns which you would like to have reviewed as part of determining compliance with your programs?

List all minority contractors/suppliers (Minority Owned Business Enterprises MBE or Women Owned Business Enterprises WBE) with which you have contracted during this reporting period.

NAME OF COMPANY _____

STREET ADDRESS _____

REPRESENTATIVE NAME _____

TELEPHONE NUMBER _____

EMAIL ADDRESS _____

WEBSITE ADDRESS _____

PRODUCTS, SERVICE, AREA OF SCOPE OF WORK:

DURATION OF CONTRACT _____

AMOUNT OF CONTRACT _____

JACKSON COUNTY CONTRACT: ____ YES ____ NO

REPEAT THE ABOVE INFORMATION ON A SEPARATE SHEET FOR ADDITIONAL MBE/WBE FIRMS WITH WHOM YOU HAVE CONTRACTED.

Figures of Employment Analysis section of this report was obtained from:

	YES	NO
1. Available employment	____	____
2. Visual check	____	____
3. Other (specify) _____	____	____

This Compliance Review Form was prepared and submitted by:

Signature

Name and Title

Date

I certify that all answers and information herein contained are true to the best of my knowledge, and I understand that any mis-statement of fact may subject this company to non-compliance procedures.